** PUBLIC DISCLOSURE COPY **

orm **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2018
Open to Public Inspection

| A | For 1 | the 20 | J18 calendar year, or tax year beginning and | d ending | | | | |
|-------------------------|------------------|----------------------|---|--------------|-------------|----------------|----------|--|
| В | Check applica | if able: | C Name of organization | | D Em | ployer ide | ntifi | ication number |
| | | dress ange | NATIONAL RIFLE ASSOCIATION OF AMERICA | | | | | |
| | | inge | Doing business as | | | 53 | -0 | 116130 |
| | Initi | ırn | Number and street (or P.O. box if mail is not delivered to street address) | Room/suite | E Tele | ephone nu | | |
| | | al urn/ min- | 11250 WAPLES MILL ROAD | | | 70 | 3- | 267-1000 |
| _ | ate | d ended | City or town, state or province, country, and ZIP or foreign postal code | | G Gros | ss receipts \$ | | 367,702,748. |
| F | retu | ırn | FAIRFAX, VA 22030 | | _ | this a gro | - | |
| L | tion pen | plica- n iding | F Name and address of principal officer: CRAIG B. SPRAY | | | or subordin | | |
| $\overline{}$ | Tove | | SAME AS C ABOVE ot status: 501(c)(3) X 501(c) (4) ◀ (insert no.) 4947(a)(1) | | 7 | | | ncluded? Yes No |
| _ | | | ot status:501(c)(3) _X 501(c) (4) ◀ (insert no.)4947(a)(1) ► WWW . NRA . ORG | or 52 | 70.70 | | | list. (see instructions) |
| | | | anization: X Corporation Trust Association Other | I Vos | | | | on number M State of legal domicile: NY |
| | art I | | ummary | L Tea | i oi iormai | 10n; 107 | <u> </u> | VI State of legal domicile; IN I |
| _ | 1 | _ | ofly describe the organization's mission or most significant activities: FIRE | ARMS S | SAFET | Y. EDI | UC | ATTON AND |
| Activities & Governance | 3 | | AINING; AND ADVOCACY ON BEHALF OF SAFE | | | | | |
| 2 | 2 | | eck this box 🕨 🔲 if the organization discontinued its operations or dispo | | | | | |
| Ş | 3 | | mber of voting members of the governing body (Part VI, line 1a) | | | | 3 | 76 |
| Ğ | 4 | Nu | mber of independent voting members of the governing body (Part VI, line 1b) | | | | 4 | 67 |
| 9 | 5 | Tot | al number of individuals employed in calendar year 2018 (Part V, line 2a) | | | | 5 | 816 |
| ž. | 6 | Tot | al number of volunteers (estimate if necessary) | | | | 6 | 150000 |
| Acti | 7 | a Tot | al unrelated business revenue from Part VIII, column (C), line 12 | | | | 7a | 23,943,194. |
| _ | | b Net | unrelated business taxable income from Form 990-T, line 38 | | | | 7b | 0. |
| | | | | | | r Year | _ | Current Year |
| 9 | 8 | | ntributions and grants (Part VIII, line 1h) | | | 26,53 | | 108,599,726. |
| Jua, | 9 | | gram service revenue (Part VIII, line 2g) | | | 55,30 | | 193,010,155. |
| Revenue | 10 | | estment income (Part VIII, column (A), lines 3, 4, and 7d) | | | 93,99 | | 2,192,041. |
| | " | | ner revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | | 11,91 | | 48,748,942. |
| - | 12 | | al revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | | | 87,73 | _ | 352,550,864. |
| | 13 | | ants and similar amounts paid (Part IX, column (A), lines 1-3) | | | 93,33 | _ | 75,661. |
| | 14 | | nefits paid to or for members (Part IX, column (A), line 4) | | 66 7 | | 0. | 0. |
| Expenses | 15 | | aries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | | | 89,56 43,03 | _ | |
| en | '0 | | fessional fundraising fees (Part IX, column (A), line 11e) al fundraising expenses (Part IX, column (D), line 25) 48,091,5 | 85 | 0,9 | 43,03 | ۰. | 7,798,658. |
| Щ | 17 | | er expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | | 254 0 | 05,71 | Ω | 283,536,156. |
| | 18 | | al expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | | | 31,65 | | |
| | 19 | | renue less expenses. Subtract line 18 from line 12 | | | 43,91 | | -2,724,453. |
| 70 | | | | | | f Current Y | | End of Year |
| sets | 20 | Tota | al assets (Part X, line 16) | | | 25,68 | | 197,212,080. |
| Ass | 21 | | al liabilities (Part X, line 26) | | | 75,47 | | 181,180,554. |
| Net Assets or | 22 | | assets or fund balances. Subtract line 21 from line 20 | | | 50,20 | | 16,031,526. |
| P | art I | | ignature Block | | | | | |
| | | | of perjury, I declare that I have examined this return, including accompanying schedule | | | | of my | knowledge and belief, it is |
| true | , corr | ect, ar | d complete. Declaration of preparer (other than officer) is based on all information of w | hich prepare | r has any k | nowledge. | | |
| | | | Signature of officer | | | L | irl | 346/19 |
| Sig | | | | | | Date | | |
| Hei | re | | CRAIG B. SPRAY, TREASURER Type or print name and title | | | | | |
| _ | | Pui | | | Date | 100 | | DTIN |
| Paid | d | 4 | nt/Type preparer's name CK FORTSCH, CPA Preparer's signature | , | 11/14/ | 19 Chec | | PTIN |
| | u parer | | m's name RSM US LLP | | , | 5011-6 | employ | |
| | Only | | n's address NONE SOUTH WACKER DR STE 800 | | | Firm's EIN | • | 42-0714325 |
| | V.IIJ | ' " | CHICAGO, IL 60606-3392 | | | Dhone ne | 31 | 2-634-3400 |
| Mar | v the | IBS d | liscuss this return with the preparer shown above? (see instructions) | | | riione no. | JI. | X Yes No |
| | , | | | | | | | LALIES LINO |

| Pa | rt III Statement of Program Service Accomplishments |
|-------|--|
| 0.555 | |
| 1 | Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission: |
| • | PER NRA BYLAWS, TO PROTECT AND DEFEND THE U.S. CONSTITUTION; TO |
| | PROMOTE PUBLIC SAFETY, LAW AND ORDER, AND NATIONAL DEFENSE; TO TRAIN |
| | LAW ENFORCEMENT AGENCIES AND CIVILIANS IN MARKSMANSHIP; TO PROMOTE |
| | SHOOTING SPORTS AND HUNTING. |
| 2 | Did the organization undertake any significant program services during the year which were not listed on the |
| | prior Form 990 or 990-EZ? |
| | If "Yes," describe these new services on Schedule O. |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program services? |
| | If "Yes," describe these changes on Schedule O. |
| 4 | Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. |
| | Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and |
| | revenue, if any, for each program service reported. |
| 4a | (Code:) (Expenses \$ 140,238,506. including grants of \$ 75,661.) (Revenue \$ 203,053,219.) |
| | NRA MEMBERSHIP SUPPORT INCLUDES PUBLICATIONS, EDUCATION AND TRAINING. |
| | FIELD SERVICES, COMPETITIVE SHOOTING, LAW ENFORCEMENT, HUNTER SERVICES, |
| | MEMBER COMMUNICATIONS SERVICES, MEMBER PROGRAMS, MEMBER SERVICES, AND |
| | FULFILLMENT OF MEMBER SERVICES. THE CHIEF VALUE OF NRA MEMBERSHIP IS IN |
| | GUN SAFETY AND TRAINING ALONG WITH REGULAR REINFORCEMENT OF THESE |
| | LESSONS AND PRINCIPLES BY KEEPING ENGAGED WITH THE COMMUNITY OF OUTDOOR |
| | LOVERS AND SAFE AND RESPONSIBLE SHOOTING ENTHUSIASTS. NRA MEMBERSHIP |
| | SUPPORT AND FULFILLMENT ARE DEDICATED TO PROVIDING NRA MEMBERS WITH |
| | HIGH QUALITY SUPPORT AS WELL AS CONTENT DELIVERED THROUGH MANY |
| | PLATFORMS. SAFE AND RESPONSIBLE GUN OWNERSHIP REMAINS THE CORNERSTONE |
| | OF EVERYTHING THE ASSOCIATION PROVIDES FOR MEMBERS. |
| 41- | (a.) 1/a . 32 E07 712 |
| 4b | (Code:) (Expenses \$ 32,507,712. including grants of \$ 0.) (Revenue \$ 0.) THE NRA INSTITUTE FOR LEGISLATIVE ACTION ADVOCATES ON BEHALF OF SAFE |
| | AND RESPONSIBLE GUN OWNERS. AS THE FOREMOST PROTECTOR AND DEFENDER OF |
| | THE SECOND AMENDMENT, THE NRA PROMOTES FIREARMS SAFETY, ADVOCATES |
| | AGAINST EFFORTS TO ERODE GUN RIGHTS AND FREEDOMS, FIGHTS FOR |
| | INITIATIVES AIMED AT REDUCING VIOLENT CRIME, AND PROMOTES |
| | HUNTERS'RIGHTS AND CONSERVATION EFFORTS. NRA MEMBERS RECOGNIZE THIS |
| | VITAL IMPORTANCE OF NRAILA'S TRUE GRASSROOTS WORK TO PRESERVE THE |
| | SECOND AMENDMENT FOR FUTURE GENERATIONS OF SHOOTERS AND OUTDOOR |
| | SPORTSMEN AND SPORTSWOMEN. THIS LEGION OF ENGAGED AND MOTIVATED MEMBERS |
| | IS THE REASON FOR THE NRA'S STRENGTH. |
| | |
| | |
| 4¢ | (Code:) (Expenses \$18,732,003. including grants of \$) (Revenue \$20,582,280.) |
| | NRA SHOWS AND EXHIBITS INCLUDE THE NRA ANNUAL MEETINGS AND MEMBERS |
| | EXHIBIT HALL, HELD IN A DIFFERENT CITY EACH YEAR, AND OTHER SHOWS |
| | AROUND THE COUNTRY. THE ANNUAL MEETINGS AND EXHIBITS ARE PRESENTED AS A |
| | CELEBRATION OF AMERICAN FREEDOM FEATURING ACRES OF EXHIBITS, PREMIER |
| | EVENTS, EDUCATIONAL SEMINARS AND WORKSHOPS, AND FUN-FILLED ACTIVITIES |
| | FOR THE ENTIRE FAMILY. DALLAS, TEXAS WAS THE 2018 HOST CITY. OTHER NRA |
| | HOSTED SHOWS INCLUDED THE GREAT AMERICAN OUTDOOR SHOW HELD IN |
| | HARRISBURG, PENNSYLVANIA. |
| | |
| | |
| | |
| 44 | Other program services (Describe in Schedule O.) |
| TU | E |
| 4e | (Expenses \$ 59,426,544. including grants of \$ 0.) (Revenue \$ 1,330,515.) Total program service expenses ▶ 250,904,765. |
| .0 | TOTAL PROGRAM COLUMN SALES AND SALES |

X

X

X

X

18

19

20a

20b

NATIONAL RIFLE ASSOCIATION OF AMERICA Form 990 (2018) 53-0116130 Page 3 Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A X Is the organization required to complete Schedule B, Schedule of Contributors? X 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I X 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III X 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I X 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II X Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III X R Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? X If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V X If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X 11 as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D. X Part VI 11a b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII X 11b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII X 11c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX X 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X X 11e f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII X 12a Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Х 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E X 14a Did the organization maintain an office, employees, or agents outside of the United States? X 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV X 14b 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV X Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to 16 or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV X Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Х 17 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII. lines

1c and 8a? If "Yes," complete Schedule G, Part II

complete Schedule G, Part III

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or

19

Form 990 (2018) NATIONAL RIFLE ASSOCIATION OF AMERICA
Part IV Checklist of Required Schedules (continued)

| | | | Yes | No |
|-------------|---|------------|-------|----------|
| 22 | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on | | | |
| | Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | X | _ |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current | | | |
| | and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete | | | |
| 24.0 | Schedule J | 23 | X | |
| 2 4a | last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete | | | |
| | Schedule K. If "No," go to line 25a | | | x |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24a 24b | - | _ |
| | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease | 240 | | _ |
| | any tax-exempt bonds? | 24c | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | _ |
| | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit | | | |
| | transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | x |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and | | | |
| | that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete | | | |
| | Schedule L, Part I | 25b | | X |
| 26 | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or | | | |
| | former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," | | | |
| | complete Schedule L, Part II | 26 | | X |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial | | | |
| | contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member | | | |
| | of any of these persons? If "Yes," complete Schedule L, Part III | 27 | | <u> </u> |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV | | | |
| | instructions for applicable filing thresholds, conditions, and exceptions): | 2 | | |
| a | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a | Х | |
| b | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28b | | _X_ |
| C | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, | | 7,7 | |
| 29 | director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | X | |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation | 29 | Х | |
| 00 | contributions? If "Yes," complete Schedule M | | | v |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? | 30 | - | <u>X</u> |
| | If "Yes," complete Schedule N, Part I | 31 | | х |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete | 31 | | |
| | Schedule N, Part II | 32 | | X |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | OZ. | | |
| | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | Х |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and | | | |
| | Part V, line 1 | 34 | X | |
| | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | X | |
| b | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity | | | |
| | within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | Х | |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? | | | |
| | If "Yes," complete Schedule R, Part V, line 2 | 36 | | |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | |
| 38 | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | <u> </u> |
| 30 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O | | v | |
| Par | t V Statements Regarding Other IRS Filings and Tax Compliance | 38 | X | |
| | Check if Schedule O contains a response or note to any line in this Part V | | | |
| | • | | Vor I | N- |
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | | Yes | No |
| | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 | | J. F | |
| | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming | | K F | |
| | (gambling) winnings to prize winners? | 1c | х | |
| 220004 | 12.04.49 | | 000 | |

Form 990 (2018)

NATIONAL RIFLE ASSOCIATION OF AMERICA

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

| 2 a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return | 916 | | Yes | No | | | | | | |
|------------|--|--|----------|------------|------|--|--|--|--|--|--|
| h | | 816 | | 77 | 100 | | | | | | |
| | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | | 2b | X | | | | | | | |
| За | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? | 1 | | 37 | la | | | | | | |
| b | | | 3a | X | - | | | | | | |
| | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a | | 3b | X | _ | | | | | | |
| -14 | financial account in a foreign country (such as a bank account, securities account, or other financial account)? | | | | | | | | | | |
| b | If "Yes," enter the name of the foreign country: | | 4a | | X | | | | | | |
| _ | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | | | | I BY | | | | | | |
| 5a | TAYLET IN THE STATE OF THE STAT | | | | x | | | | | | |
| b | | ····· | 5a 5b | | X | | | | | | |
| С | | ····· | 5c | | | | | | | | |
| 6a | | olicit | - 5C | | _ | | | | | | |
| | any contributions that were not tax deductible as charitable contributions? | | 6a | x | | | | | | | |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts | | Ua | | | | | | | | |
| | were not tax deductible? | | 6b | х | | | | | | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | OD | | | | | | | | |
| а | POLICE AND ADDRESS OF THE PROPERTY OF THE PROP | the payor? | 7a | | | | | | | | |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | | 7b | | | | | | | | |
| | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required | | | | | | | | | | |
| | to file Form 8282? | | 7c | | | | | | | | |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | | | | | | | | | | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | | 7e | | | | | | | | |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | | 7f | | | | | | | | |
| g | The state of the s | | 7g | | | | | | | | |
| h | o and the organization like a form | 1098-C? | 7h | | | | | | | | |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the | | | | | | | | | | |
| _ | sponsoring organization have excess business holdings at any time during the year? | | 8 | | | | | | | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | | | | | | | | |
| a | Did the sponsoring organization make any taxable distributions under section 4966? | | 9a | | | | | | | | |
| b | The state of the s | | 9b | | | | | | | | |
| 10 | Section 501(c)(7) organizations. Enter: | | | | | | | | | | |
| a | ioa j | | 100 | 153 | | | | | | | |
| | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | | 13 | | | | | | | | |
| 11 a | Section 501(c)(12) organizations. Enter: Gross income from members or shareholders | | | | | | | | | | |
| | Tiu | | | 100 | | | | | | | |
| IJ | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) | | | 3 , | | | | | | | |
| 19a | amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | | | | | | | | | | |
| | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | - | 12a | | | | | | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | - 1 | | | | | | | | |
| | Is the organization licensed to issue qualified health plans in more than one state? | - | 100 | | | | | | | | |
| | Note. See the instructions for additional information the organization must report on Schedule O. | | 13a | | -5 | | | | | | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which the | | 49 | | | | | | | | |
| | organization is licensed to issue qualified health plans | | | | | | | | | | |
| С | Enter the amount of reserves on hand 13c | | | | | | | | | | |
| 14a | Did the organization receive any payments for indeer tenning convices during the tax years | | 142 | | X | | | | | | |
| | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O | during the tax year? 14a ovide an explanation in Schedule O 14b | | | | | | | | | |
| 15 | Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or | | | | | | | | | | |
| | excess parachute payment(s) during the year? | | 15 | $_{\rm X}$ | | | | | | | |
| | If "Yes," see instructions and file Form 4720, Schedule N. | | 100 | 197 | | | | | | | |
| 16 | Is the organization an educational institution subject to the section 4968 excise tax on net investment income? | | 16 | | X | | | | | | |
| | If "Yes," complete Form 4720, Schedule O. | | | | 5 | | | | | | |

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

| 0 | Check if Schedule O contains a response or note to any line in this Part VI | | | | | X |
|------|---|---------------|-----------------------|---------|---------|-----|
| Sec | tion A. Governing Body and Management | | | | | |
| | | r - r | | | Yes | No |
| 1a | Enter the number of voting members of the governing body at the end of the tax year | 1a | 76 | 1.3 | | |
| | If there are material differences in voting rights among members of the governing body, or if the governing | | | 25 14 1 | 9.0 | |
| | body delegated broad authority to an executive committee or similar committee, explain in Schedule O. | 1 1 | | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent | 1b | 67 | - 12 | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship | with any | other | PW. | | |
| | officer, director, trustee, or key employee? | | | 2 | X | |
| 3 | Did the organization delegate control over management duties customarily performed by or under the | | | | | |
| | of officers, directors, or trustees, or key employees to a management company or other person? | | | 3 | | X |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 9 | 90 was fil | ed? | 4 | | X |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's ass | ets? | | 5 | | X |
| 6 | Did the organization have members or stockholders? | | | 6 | X | |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or ap | point one | or | | | |
| | more members of the governing body? | | | 7a | х | |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, st | | | | | |
| | persons other than the governing body? | | | 7b | x | |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year | r by the fol | lowing: | | 57 | 18 |
| а | The governing body? | • | ŭ | 8a | Х | |
| þ | Each committee with authority to act on behalf of the governing body? | | | 8b | Х | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read | hed at th | e | | | |
| | organization's mailing address? If "Yes." provide the names and addresses in Schedule O | | | 9 | | х |
| Sec | tion B. Policies (This Section B requests information about policies not required by the Internal Re | venue Co | de) | | | |
| | | | 4011 | | Yes | No |
| 10a | Did the organization have local chapters, branches, or affiliates? | | Î | 10a | | X |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such ch | apters. af | iliates. | | | |
| | | | | 10b | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body | before fil | ing the form? | 11a | Х | |
| b | | | | | | |
| 12a | | | | 12a | х | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise | to conflicts | ? | 12b | X | |
| С | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "y | es " desc | rihe | 12.0 | | |
| | | | | 12c | x | |
| 13 | | | | 13 | X | |
| 14 | Port of the state | | ľ | 14 | X | |
| 15 | | by indep | endent | 111 | 100 | HAI |
| | Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official | | 50 | 1 | | |
| а | | | | 15a | x | |
| b | Other officers or key employees of the organization | | | 15b | X | |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). | *********** | | IUD | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem | ent with a | , | 18 | | |
| | taxable entity during the year? | | | 16a | | х |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate | | | IOa | 31.8 | |
| | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organi | | npation | 1 1 | | |
| | exempt status with respect to such arrangements? | | 1 | 16b | - | |
| Sect | ion C. Disclosure | ************* | | IOD | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed AL , AZ , AR , CA , C | O.CT. | DC.FL.GA | нт | TD | TT. |
| 18 | Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and | | | | | |
| | for public inspection. Indicate how you made these available. Check all that apply. | 2 330-1 (G | ection 50 ((c)(5)\$ (| энну) а | Ivaliao | ie |
| | Own website Another's website X Upon request Other (explain | in Cabad | 10.01 | | | |
| 19 | Describe in Schedule O whether (and if so, how) the organization made its governing documents, con | | | inana' | al. | |
| | statements available to the public during the tax year. | mot Of Hill | areat policy, and t | n ranci | al | |
| 20 | State the name, address, and telephone number of the person who possesses the organization's boo | ke and ro | orde - | | | |
| | CRAIG B. SPRAY, TREASURER - 703-267-1000 | no and 180 | | | | |
| | 11250 WADLES MILL RD FAIRFAY VA 22030 | | | | | |

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

X

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

| (A) | (B) | | | | C) | | | (D) | (E) | (F) |
|------------------------------|------------------------|--------------------------------|-----------------------|------------------|------------------|---------------------------------|--------------|-----------------|---------------------------|-----------------------|
| Name and Title | Average | (dc | not c | Pos heck | more | than | one | Reportable | Reportable | Estimated |
| | hours per week | offi | , unle cer ar | ss pei id a d | rson i irecto | s boti r/trus | n an tee) | compensation | compensation from related | amount of |
| | (list any | ig. | | | | | | the | organizations | other compensation |
| | hours for | Individual trustee or director | , n | | | pa | | organization | (W-2/1099-MISC) | from the |
| | related | stee | Iruste | | | pensa | | (W-2/1099-MISC) | | organization |
| | organizations below | ual tru | ional | | ploye | t com | | | | and related |
| | line) | bivibr | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | organizations |
| (1) RICHARD CHILDRESS | 10.00 | ┢ | = | U | ¥ | 工业 | <u> </u> | | | |
| 1ST VICE PRESIDENT | 1.00 | x | | x | | | | 0. | 0. | 0. |
| (2) CAROLYN D. MEADOWS | 10.00 | П | | | | Г | | | | |
| 2ND VICE PRESIDENT | 1.00 | x | | x | | | | 0. | 0. | 0. |
| (3) JOE M. ALLBAUGH | 1.00 | | | | | | | | | |
| DIRECTOR | | Х | | | | | | 0. | 0. | 0. |
| (4) WILLIAM H. ALLEN | 1.00 | | | | | | | | | |
| DIRECTOR (ENDING 6/1/2018) | | X | | | | | | 0. | 0. | 0. |
| (5) THOMAS P. ARVAS | 1.00 | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | 0. |
| (6) PAUL BABAZ | 1.00 | | | | | | | | | |
| DIRECTOR (STARTING 6/1/2018) | | X | | | | | | 0. | 0. | 0. |
| (7) SCOTT L. BACH | 1.00 | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | 0. |
| (8) WILLIAM A. BACHENBERG | 1.00 | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | 0. |
| (9) BOB BARR | 1.00 | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | 0. |
| (10) RONNIE G. BARRETT | 1.00 | | | | | | | | | |
| DIRECTOR | 4 00 | X | | | | | | 0. | 0. | 0. |
| (11) CLEL BAUDLER | 1.00 | | | | | | | | | |
| DIRECTOR | 4 00 | X | | \dashv | | | | 0. | 0. | 0. |
| (12) J. KENNETH BLACKWELL | 1.00 | | | | | | | | | |
| DIRECTOR | 1 00 | X | _ | _ | | _ | | 0. | 0. | 0. |
| (13) MATT BLUNT DIRECTOR | 1.00 | ,, | | | | | | | | |
| (14) DAN BOREN | 1 00 | X | \dashv | \dashv | - | - | _ | 0. | 0. | 0. |
| DIRECTOR | 1.00 | ., | | | | | | | | |
| (15) ROBERT K. BROWN | 1 00 | X | | \dashv | - | _ | _ | 0. | 0. | 0. |
| DIRECTOR | 1.00 | х | | | | | | | | |
| (16) PETE R. BROWNELL | 1.00 | _ | \dashv | \dashv | - | _ | - | 0. | 0. | 0. |
| DIRECTOR | 1.00 | x | | | | | | 2,997. | | • |
| (17) DAVID BUTZ | 5.00 | Δ. | | - | \dashv | _ | - | 4,33/. | 0. | 0. |
| DIRECTOR | 3.00 | x | | | | | | 100,000. | 0. | 0. |

| Part VII Section A. Officers, Directors, Tru | stees. Kev Em | plov | ees. | and | d Hid | ahes | st C | omnensated Employee | es (continued) | | | age 4 |
|---|-------------------|---------------------|-----------------------|---------|--------------|------------------------------|-------|--------------------------|-------------------|----------|----------------------|-------|
| (A) | (B) | | | (1 | C) | 9110 | - | (D) | (E) | T | (F) | |
| Name and title | Average | ١ | | Pos | sition | | | Reportable | Reportable | | stimat | od |
| | hours per | box | not c , unle | ss pe | rson i | is bot | n an | compensation | compensation | | mount | |
| | week | - | cer ar | nd a d | irecto | or/trus | tee) | from | from related | 1 - | other | |
| | (list any | trustee or director | | | | | | the | organizations | con | npensa | ation |
| | hours for related | 9 10 | 8 | | | ated | | organization | (W-2/1099-MISC) | | from th | |
| | organizations | ustee | trust | | l gg | npens | | (W-2/1099-MISC) | | ٠ - | ganizat | |
| | below | daaf | Institutional trustee | | nploy | st con | _ | | | | nd relat anizati | |
| | line) | Individual 1 | ustitu | Officer | Key employee | Highest compensated employee | or me | | | loig | ailizati | 0118 |
| (18) DEAN CAIN | 1.00 | T | | | | | T | | | \vdash | | |
| DIRECTOR (STARTING 5/5/2018) | | x | | | | | | 0. | 0. | | | 0. |
| (19) TED W. CARTER | 1.00 | | | | | | | | | - | | |
| DIRECTOR | | X | | | | | | 0. | 0. | | | 0. |
| (20) PATRICIA A. CLARK | 1.00 | | | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | | | 0. |
| (21) ALLAN D. CORS | 1.00 | | | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | 1 | | 0. |
| (22) CHARLES L. COTTON | 1.00 | | | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | | | 0. |
| (23) DAVID G. COY | 1.00 | | | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | | | 0. |
| (24) LARRY E. CRAIG | 1.00 | | | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | | | 0. |
| (25) JOHN L CUSHMAN | 1.00 | | | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | | | 0. |
| (26) R. LEE ERMEY | 1.00 | | | | | | | | | | | |
| DIRECTOR (ENDING 4/15/2018) | | X | | | | | | 0. | 0. | | | 0. |
| 1b Sub-total | | | | | | | • | 102,997. | 0. | | | 0. |
| c Total from continuation sheets to Part V | | | | | | | | 12,820,292. | 0. | 75 | 6,0 | 13. |
| d Total (add lines 1b and 1c) | | | | | | | ▶_ | 12,923,289. | 0. | 75 | 6,0: | 13. |
| 2 Total number of individuals (including but r | not limited to th | ose | liste | d ab | ove) |) wh | o re | ceived more than \$100, | 000 of reportable | | | |
| compensation from the organization | | | | | | | | | | | | 122 |
| | | | | | | | | | | | Yes | No |
| 3 Did the organization list any former officer | | | | | | | | | | | | |
| line 1a? If "Yes," complete Schedule J for s | uch individual | | | | | | | | | 3 | X | |
| 4 For any individual listed on line 1a, is the si | um of reportabl | e co | mpe | nsa | tion | and | oth | er compensation from the | ne organization | | | |
| and related organizations greater than \$15 | 0,000? If "Yes, | " co | mple | ete S | che | dule | J fo | or such individual | | 4 | Х | |
| 5 Did any person listed on line 1a receive or | | | | | | | | | | | 100 | |
| rendered to the organization? // "Yes." con Section B. Independent Contractors | nplete Schedule | Jf | or su | ch r | erso | 2n | | | | 5 | Х | |
| Court of undependent Contractors | | | | | | | | | | | | |

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

| (A) | (B) | (C) |
|--|---------------------------------|--------------|
| Name and business address | Description of services | Compensation |
| ACKERMAN MCQUEEN INC | PUBLIC RELATIONS AND | |
| | ADVERTISING | 31,994,168. |
| INFOCISION MANAGEMENT CORP | MEMBERSHIP | |
| 325 SPRINGSIDE DR, AKRON, OH 44333 | PROCESSING AND CONTR | 25,727,854. |
| BREWER ATTORNEYS AND COUNSELORS | | |
| 1717 MAIN ST, SUITE 5900, DALLAS, TX 75201 | LEGAL SERVICES | 13,832,060. |
| MEMBERSHIP MARKETING PARTNERS LLC, 11250 | FUNDRAISING PRINTING | |
| WAPLES MILL TD, SUITE 310, FAIRFAX, VA | AND MAILING | 12,561,213. |
| VALTIM INC | | |
| 1095 VENTURE DR, FOREST, VA 24551 | FULFILLMENT CENTER | 8,836,104. |
| 2 Total number of independent contractors (including but not limited to those listed | d above) who received more than | |
| \$100,000 of compensation from the organization \(\) | · | |
| CHE DADE UTT CHOMICAL A COMMING PROPERTY | | |

| Part VII Section A. Officers, Directors (A) | , Trustees, Key Ei (B) | nplo | yee | s, ai | nd H | ligh | est (| Compensated Employe | ees (continued) | <i>(</i> =1 |
|---|--|--------------------------------|-----------------------|----------|---------------------|------------------------------|--------|--|--|---|
| (A) Name and title | Average hours per | (c | heck | Pos | c) ition that | | ly) | (D) Reportable compensation from | (E) Reportable compensation | (F) Estimated amount of |
| | week (list any hours for related organizations below line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | the organization (W-2/1099-MISC) | from related organizations (W-2/1099-MISC) | other compensation from the organization and related organizations |
| (27) EDIE P. FLEEMAN DIRECTOR | 1.00 | x | | | | | | 0. | 0. | 0 |
| (28) CAROL FRAMPTON DIRECTOR | 1.00 | | | | | | | | | |
| (29) JOEL FRIEDMAN | 1.00 | X | | | | - | | 0. | 0. | 0 |
| DIRECTOR | | x | | | | | | 0. | 0. | 0 |
| (30) SANDRA S. FROMAN DIRECTOR | 5.00 | x | | | | | | 13,060. | 0. | 0 |
| (31) JULIE GOLOB | 5.00 | | | | | | | | | |
| DIRECTOR (STARTING 5/5/2018) (32) MARIA HEIL | 1.00 | Х | | | - | | _ | 28,661. | 0. | 0 |
| DIRECTOR | 1.00 | x | | | | | | 0. | 0. | 0 |
| (33) GRAHAM HILL | 1.00 | _ | | | | | | | | |
| DIRECTOR (34) STEVE HORNADY | 1.00 | X | Н | | - | | _ | 0. | 0. | 0 |
| DIRECTOR (ENDING 5/5/2018) | 1.00 | x | | | | | | 0. | 0. | 0 |
| (35) SUSAN HOWARD | 1.00 | | | | | | | | | |
| DIRECTOR | | Х | Ш | | | Ц | | 0. | 0. | 0 |
| (36) CURTIS S. JENKINS DIRECTOR | 1.00 | x | | | | | | 0. | 0. | 0 |
| (37) DAVID A. KEENE | 1.00 | | | | \exists | П | | | | |
| DIRECTOR | | X | | | | | | 40,000. | 0. | 0 |
| (38) TOM KING DIRECTOR | 1.00 | x | | | | | | 0. | | |
| (39) TIMOTHY KNIGHT | 1.00 | ^ | \vdash | | \dashv | \dashv | | 0. | 0. | 0 |
| DIRECTOR | | x | | | | | | 0. | 0. | 0 |
| (40) HERBERT A. LANFORD JR. | 1.00 | | | | | | | | | |
| DIRECTOR | 1 00 | X | | - | - | - | | 0. | 0. | 0 . |
| (41) WILLES K. LEE DIRECTOR | 1.00 | x | | | | | | | | • |
| (42) CARRIE LIGHTFOOT | 1.00 | ^ | | \dashv | \dashv | \dashv | - | 0. | 0. | 0 |
| DIRECTOR (STARTING 5/5/2018) | 1.00 | х | | | | | | 2,907. | 0. | 0 |
| (43) DUANE LIPTAK, JR | 1.00 | | | | \neg | \neg | \neg | 2/50/1 | 0. | 0 . |
| DIRECTOR (STARTING 5/5/2018) | | х | | | | | | 0. | 0. | 0 . |
| (44) KARL A. MALONE | 1.00 | | | | | | | | | 0. |
| DIRECTOR | | Х | | | | | | 0. | 0. | 0. |
| (45) SEAN MALONEY | 1.00 | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | 0 . |
| (46) ROBERT E. MANSELL DIRECTOR | 1.00 | х | | | | | | 0 | | |
| DIVECTOR | | | | | | | | 0. | 0. | 0 |

Form 990

| Part VII Section A. Officers, Directors, | | | | | | | | Compensated Employe | ees (continued) | 0130 |
|--|-------------------|------------|-----------------------|----------|--------------|------------------------------|--------------|---------------------|-----------------|------------------------------|
| (A) | (B) | ľ | | | C) | | | (D) | (E) | (F) |
| Name and title | Average | | | Posi | | 1 | | Reportable | Reportable | Estimated |
| | hours | (c | heck | all t | that | арр | ly) | compensation | compensation | amount of |
| | per | | | | | | | from | from related | other |
| | week | _ | | | | loyee | | the | organizations | compensation |
| | (list any | director | | | | empl | | organization | (W-2/1099-MISC) | from the |
| | hours for related | Ιb | ee tee | | | sated | | (W-2/1099-MISC) | | organization |
| | organizations | trustee | al trus | | ae Ae | m per | | | | and related organizations |
| | below | Individual | Institutional trustee | | Key employee | Highest compensated employee | | | | Organizations |
| | line) | Indi- | Instit | Officer | Key e | High | Рогте | | | |
| (47) BILL MILLER | 1.00 | П | | | | | T | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | 0. |
| (48) OWEN BUZ MILLS | 1.00 | | | | | | | | | |
| DIRECTOR | | X | | | | | | 5,553. | 0. | 0. |
| (49) CRAIG MORGAN | 1.00 | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | 0. |
| (50) IL LING NEW | 1.00 | | | | | | | | | |
| DIRECTOR (STARTING 5/5/2018) | | X | | | | | | 0. | 0. | 0. |
| (51) GROVER NORQUIST | 1.00 | | | | | | | | | |
| DIRECTOR (ENDING 5/5/2018) | | X | | \Box | | | | 0. | 0. | 0. |
| (52) ROBERT A. NOSLER | 1.00 | | | | | | | _ | | |
| DIRECTOR | 4 00 | X | | | | | | 0. | 0. | 0. |
| (53) JOHNNY NUGENT | 1.00 | | | | | | | | | |
| DIRECTOR | 1 00 | Х | | _ | | | | 0. | 0. | 0. |
| (54) TED NUGENT | 1.00 | | | | | | | 64.004 | _ | |
| DIRECTOR (55) LANCE OLSON | F 00 | X | | \dashv | - | | | 64,234. | 0. | 0. |
| DIRECTOR | 5.00 | x | | | | | | 75 000 | | |
| (56) MELANIE PEPPER | 1.00 | Δ | Н | \dashv | \vdash | _ | | 75,000. | 0. | 0. |
| DIRECTOR | 1.00 | x | | | | | | ا م | _ | 0 |
| (57) JAMES W. PORTER II | 1.00 | Α | - | \dashv | \dashv | - | H | 0. | 0. | 0. |
| DIRECTOR | 1.00 | x | | | | | | 0. | 0. | 0 |
| (58) JAY PRINTZ | 1.00 | | | \dashv | \dashv | | | 0. | 0. | 0. |
| DIRECTOR | 1.00 | x | | | | | | 0. | 0. | 0. |
| (59) TODD J. RATHNER | 1.00 | | | \dashv | \neg | | | 0. | 0. | 0. |
| DIRECTOR | 1100 | x | | | | | | 0. | 0. | 0. |
| (60) KIM RHODE | 1.00 | Ē | | | \neg | | | | 0. | 0. |
| DIRECTOR | | x | | | | | | 0. | 0. | 0. |
| (61) WAYNE ANTHONY ROSS | 1.00 | | | \neg | \neg | | | | | 0. |
| DIRECTOR | | x | | | | | | 0. | 0. | 0. |
| (62) CARL T. ROWAN, JR. | 1.00 | | | | | | | | | |
| DIRECTOR | | x | | | | | | 0. | 0. | 0. |
| (63) DON SABA | 1.00 | | | | | | | | | |
| DIRECTOR | | х | | | | | | 0. | 0. | 0. |
| (64) WILLIAM H. SATTERFIELD | 1.00 | | | T | | | | | | |
| DIRECTOR | | Х | | | | | | 0. | 0. | 0. |
| (65) RONALD L. SCHMEITS | 1.00 | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | 0. |
| (66) ESTHER Q. SCHNEIDER | 1.00 | | | | | | | | | |
| DIRECTOR | | X | | \Box | | | | 0. | 0. | 0. |
| | | | | | | | | | | |
| Total to Part VII, Section A, line 1c | | | | | | | ,, | | | |

| Part VII Section A. Officers, Directors, Ti (A) | (B) | T | | ((| C) | a | , | (D) | (E) | (F) |
|---|------------------------|------------|-----------------------|-----------|--------------|------------------------------|----------|---------------------------------|-----------------|-----------------------------|
| Name and title | Average | | | | -, ition | | | Reportable | Reportable | Estimated |
| | hours | (c | heck | all t | that | арр | ly) | compensation | compensation | amount of |
| | per | | | | | | | from | from related | other |
| | week | _ | | | | loyee | | the | organizations | compensation |
| | (list any hours for | director | | | | emp | | organization (W-2/1099-MISC) | (W-2/1099-MISC) | from the |
| | related |) TO 9 | stee | | | satec | | (44-27 1099-141130) | | organization and related |
| | organizations | trust | al tru | |)yee | эдшо | | | | organizations |
| | below | Individual | Institutional trustee | <u>15</u> | Key employee | Highest compensated employee | <u>ē</u> | | | |
| | line) | <u>a</u> | lust | Officer | Key | High | Former | | | |
| (67) STEVEN C. SCHREINER | 1.00 | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | 0. |
| (68) TOM SELLECK | 1.00 | | | | | | | | | |
| DIRECTOR (ENDING 9/8/2018) | | X | | | | | | 0. | 0. | 0. |
| (69) JOHN C. SIGLER | 1.00 | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | 0. |
| (70) LEROY SISCO | 1.00 | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | 0. |
| (71) BART SKELTON | 5.00 | | | | | | | | | |
| DIRECTOR | | X | | | | | | 15,000. | 0. | 0. |
| (72) STEPHANIE SPIKA | 1.00 | | | | | | | | | |
| DIRECTOR (4/15/2018-5/5/2018) | | X | | | | | | 0. | 0. | 0. |
| (73) KRISTY TITUS | 1.00 | | | | | | | | | |
| DIRECTOR (STARTING 5/5/2018) | | X | | | | | | 0. | 0. | 0. |
| (74) DWIGHT D. VAN HORN | 1.00 | | | | | | | | | |
| DIRECTOR | | X | | _ | | | | 0. | 0. | 0. |
| (75) BLAINE E. WADE | 1.00 | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | 0. |
| (76) LINDA L. WALKER | 1.00 | | | | | | | | | |
| DIRECTOR | | X | | | | | | 0. | 0. | 0. |
| (77) HOWARD J. WALTER | 1.00 | | | | | | | | | |
| DIRECTOR | | Х | | _ | | | | 0. | 0. | 0. |
| (78) HEIDI E. WASHINGTON | 1.00 | | | | | | | | | |
| DIRECTOR | | X | | | _ | | | 0. | 0. | 0. |
| (79) ALLEN B. WEST | 1.00 | | | | | | | | | |
| DIRECTOR | 1 | X | | _ | | _ | | 0. | 0. | 0. |
| (80) ROBERT J. WOS | 1.00 | | | | | | | | | |
| DIRECTOR (ENDING 5/5/2018) | 4 00 | X | _ | | _ | _ | | 0. | 0. | 0. |
| (81) DONALD E. YOUNG | 1.00 | | | | | | | | | |
| DIRECTOR | 50.00 | X | | _ | _ | - | | 0. | 0. | 0. |
| (82) WAYNE LAPIERRE | 60.00 | | | | | | | 0 450 451 | | |
| CEO AND EXECUTIVE VICE PRESIDENT | 1.00 | | | Х | | _ | _ | 2,150,634. | 0. | 73,793. |
| (83) CHRIS W. COX | 49.00 | | | | | | | 4 005 046 | _ | |
| EXECUTIVE DIRECTOR, NRAILA | 1.00 | | \vdash | Х | | \dashv | | 1,285,318. | 0. | 107,350. |
| (84) WILSON H. PHILLIPS | 29.00 | | | Ţ. | | | | 000 505 | | حدادا |
| TREASURER (ENDING 9/13/2018) | 11.00 | | | Х | \dashv | - | | 900,537. | 0. | 48,232. |
| (85) JOSHUA L. POWELL | 40.00 | | | <u>,</u> | | | | 044 455 | _ | |
| CHIEF OF STAFF AND EXEC. DIR | 20.00 | - | _ | X | - | \dashv | | 844,137. | 0. | 75,832. |
| (86) CRAIG B. SPRAY | 39.00 | | | Ψ, | | | | FAC 252 | | . |
| TREASURER (FROM 9/13/2018) | 11.00 | | | X | | | | 596,958. | 0. | 51,257. |

| Part VII Section A. Officers, Directors, Tre | ustees, Key Er | nplo | yee | s, a | nd F | ligh | est | Compensated Employe | ees (continued) | |
|--|-------------------|--------------------|-----------------------|---------|--------------|------------------------------|--------|---|-----------------|--------------------------|
| (A) | (B) | | | (6 | C) | | | (D) | (E) | (F) |
| Name and title | Average | ١. | | | ition | | | Reportable | Reportable | Estimated |
| | hours | (C | heck | all | that | app | ly) | compensation | compensation | amount of |
| | per | | | | | ا _ق ا | | from | from related | other |
| | week (list any | ĕ | | | | ploye | | the organization | organizations | compensation |
| | hours for | director | | | | d em | | (W-2/1099-MISC) | (W-2/1099-MISC) | from the organization |
| | related | 5 | stee | | | nsate | | (** = ********************************* | | and related |
| | organizations | trust | lal fr. | | oyee | adwo | | | | organizations |
| | below | Individual trustee | Institutional trustee | je | Key employee | Highest compensated employee | ie. | | | |
| | line) | in die | Inst | Officer | Key | High | Former | | | |
| (87) JOHN C. FRAZER | 50.00 | | | | | | | | | |
| SECRETARY AND GENERAL COUNSEL | 1.00 | | | X | | | | 413,076. | 0. | 76,577 |
| (88) JOSEPH P. DEBERGALIS, JR. | 50.00 | | | | | | | | | |
| EXEC DIR, GENERAL OPS (STARTING 12/3 | | | | X | | | | 403,226. | 0. | 57,802 |
| (89) TYLER SCHROPP | 50.00 | | | | | | | | | |
| MANAGING DIRECTOR, ADVANCEMENT | 1.00 | | | | | X | | 733,145. | 0. | 73,623 |
| (90) TODD GRABLE | 50.00 | | | | | | | | | |
| EXECUTIVE DIRECTOR, MEMBERSHIP | | | | | | X | | 667,386. | 0. | 66,154 |
| (91) DOUGLAS HAMLIN | 50.00 | | | | | | | | | |
| EXECUTIVE DIRECTOR, PUBLICATIONS | | | | | | X | | 581,321. | 0. | 74,409 |
| (92) DAVID LEHMAN | 50.00 | | | | | | | | | |
| DEPUTY EXECUTIVE DIRECTOR, NRAILA | 1.00 | | | | | X | | 571,732. | 0. | 31,121 |
| (93) ERIC FROHARDT | 40.00 | | | | | | | | | |
| DIRECTOR, EDUCATION AND TRAINING | | | | | | X | | 525,745. | 0. | 19,863 |
| (94) ROBERT K. WEAVER | 0.00 | | | | | | | | | |
| FMR EXE. DIR, GENERAL OPERATIONS | | | | | | | X | 720,000. | 0. | 0 |
| (95) MICHEL MARCELLIN | 0.00 | | | | | | | | | |
| FMR MANAGING DIR, AFFINITY AND LICEN | | | | | | | X | 535,045. | 0. | 0 |
| (96) OLIVER L. NORTH | 20.00 | | | | | | | | | |
| PRESIDENT | 1.00 | X | | X | | | | 1,377,617. | 0. | 0 |
| (97) MARION P. HAMMER | 5.00 | | | | | | | | | |
| DIRECTOR | | X | | | | | | 270,000. | 0. | 0 |
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| | | | | | | | | 12,820,292. | | 756,013 |
| otal to Part VII, Section A, line 1c | | | | | | | | | | |

Form 990 (2018)

Part VIII Statement of Revenue (B) Check if Schedule O contains a response or note to any line in this Part VIII X (D)
Revenue excluded from tax under sections 512 - 514 (C) (A) Related or Total revenue Unrelated exempt function business revenue revenue 1 a Federated campaigns Contributions, Gifts, Grants and Other Similar Amounts 1a b Membership dues 1b c Fundraising events 1c d Related organizations 13,959,442. 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f 94,640,284 407,352, 9 Noncash contributions included in lines 1a-1f: \$ h Total. Add lines 1a-1f _____ 108,599,726, **Business Code** 2 a MEMBER DUES 813410 170,391,374. 170,391,374 Program Service Revenue b PROGRAM FEES 813410 22,618,781. 22,618,781. f All other program service revenue g Total. Add lines 2a-2f 193,010,155 Investment income (including dividends, interest, and other similar amounts) 1,193,705. 1,193,705. Income from investment of tax-exempt bond proceeds Royalties 16,532,433. 16,532,433. (i) Real (ii) Personal 1,357,108. 6 a Gross rents b Less: rental expenses 2,203,501. -846,393, c Rental income or (loss) -846,393, d Net rental income or (loss) -846,393. 7 a Gross amount from sales of (i) Securities (ii) Other 9,261,323. assets other than inventory b Less: cost or other basis and sales expenses 8,262,987. 998,336. c Gain or (loss) d Net gain or (loss) 998,336. 998,336. 8 a Gross income from fundraising events (not Revenue including \$ contributions reported on line 1c). See Part IV, line 18 a 1,403,289 Other b Less: direct expenses _____ b 296,246. 1,107,043. c Net income or (loss) from fundraising events 1,107,043. 9 a Gross income from gaming activities. See Part IV, line 19 _____a b Less: direct expenses _____ b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 10,853,015. and allowances 4,389,150. b Less: cost of goods sold c Net income or (loss) from sales of inventory 6,463,865. 7,513,384, -1,049,519 Miscellaneous Revenue **Business Code** 11 a ADVERTISING 541800 23,881,546, 23,881,546 OTHER UNRELATED BUSINESS ACTIVITY 900004 1,111,167. 1,111,167. c CAFE SALES 722320 361,429, 361,429. 900009 137,852. d All other revenue 137,852. e Total. Add lines 11a-11d 25,491,994, Total revenue. See instructions 352,550,864. 200,661,391. 12 23,943,194. 19,346,553.

| Sect | ion 501(c)(3) and 501(c)(4) organizations must com | plete all columns. All oth | er organizations must co | mplete column (A). | |
|------|--|----------------------------|---|-------------------------------------|--------------------------|
| | Check if Schedule O contains a respo | | | ngista column proj. | X |
| | not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| 1 | Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 | 13,328. | 13,328. | | |
| 2 | Grants and other assistance to domestic | | | | |
| | individuals. See Part IV, line 22 | 62,333. | 62,333. | | |
| 3 | Grants and other assistance to foreign | | · | | |
| | organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 | | | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, | | | | |
| • | trustees, and key employees | 7,673,480. | 2,458,981. | 4,792,957. | 421,542. |
| 6 | Compensation not included above, to disqualified | 7,070,000 | 2/130/3011 | 4,134,331. | 441,344. |
| | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | 720,000. | | 720,000. | |
| 7 | Other salaries and wages | 40,314,676. | 25,980,846. | 11,606,692. | 2,727,138. |
| 8 | Pension plan accruals and contributions (include | | , | | 27727,1301 |
| | section 401(k) and 403(b) employer contributions) | 7,988,421. | 4,512,549. | 2,921,394. | 554,478. |
| 9 | Other employee benefits | 4,538,230. | 2,878,218. | 1,345,012. | 315,000. |
| 10 | Payroll taxes | 2,630,035. | 1,668,010. | 779,474. | 182,551. |
| 11 | Fees for services (non-employees): | | | • | |
| а | Management | | | | |
| b | Legal | 25,064,761. | 8,633,178. | 16,431,583. | |
| С | Accounting | 164,730. | | 164,730. | |
| | Lobbying | 618,525. | 618,525. | | |
| е | Professional fundraising services. See Part IV, line 17 | 7,798,658. | | | 7,798,658. |
| f | | 197,342. | | 197,342. | |
| g | Other. (If line 11g amount exceeds 10% of line 25, | | | | |
| | column (A) amount, list line 11g expenses on Sch 0.) | 17,858,262. | 17,858,262. | | |
| 12 | Advertising and promotion | 50,197,599. | 38,815,749. | | 11,381,850. |
| 13 | Office expenses | 6,668,186. | 3,553,053. | 3,115,133. | |
| 14 | Information technology | 11,707,133. | 6,794,820. | 4,912,313. | |
| 15 | Royalties | 1 026 052 | 1 000 454 | 060 400 | |
| 16 | Occupancy | 1,936,953. | 1,067,454. | 869,499. | |
| 17 | Travel Payments of travel or entertainment expenses | 8,472,207. | 6,123,416. | 2,348,791. | |
| 18 | for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | 8,076,852. | 5,848,020. | 2,228,832. | |
| 20 | Interest | 1,645,869. | 876,110. | 769,759. | |
| 21 | Payments to affiliates | 2,015,005. | 070,110. | 109,139. | |
| 22 | Depreciation, depletion, and amortization | 4,065,900. | 2,900,998. | 1,164,902. | |
| 23 | Insurance | 1,772,834. | 1,772,834. | | |
| 24 | Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) | | | | |
| а | ADD'L MEMBER COMMUNICAT | 62,702,161. | 41,126,865. | | 21,575,296. |
| b | ADD'L TRAINING AND COMM | 34,628,656. | 34,628,656. | | |
| c | ADD'L PRINTING AND PUBL | 25,296,137. | | | |
| d | ADD'L ILA LEGISLATIVE P | 10,600,121. | | | |
| е | All other expenses | 11,861,928. | 6,816,302. | 1,910,554. | 3,135,072. |
| 25 | Total functional expenses. Add lines 1 through 24e | 355,275,317. | 250,904,765. | 56,278,967. | 48,091,585. |
| 26 | $\mbox{\sc Joint costs.}$ Complete this line only if the organization | | | | |
| | reported in column (B) joint costs from a combined | | | | |
| | educational campaign and fundraising solicitation. | | | | |
| | Check here if following SOP 98-2 (ASC 958-720) | | | | |

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X Beginning of year End of year 1 Cash - non-interest-bearing 1 Savings and temporary cash investments 17,764,563. 23,937,821. 2 3 Pledges and grants receivable, net 841,562. 70,154,574. 1,184,593. 3 Accounts receivable, net 66,861,150. 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 3,000,000. 3,000,000. Notes and loans receivable, net 7 13,639,054. Inventories for sale or use 10,632,177. 8 Prepaid expenses and deferred charges 3,277,662. 3,179,694. 10a Land, buildings, and equipment: cost or other 79,426,001. basis. Complete Part VI of Schedule D ______ 10a b Less: accumulated depreciation _________10b 46,716,970. 34,475,160. 32,709,031. 10c 47,415,094. Investments - publicly traded securities 44,066,394. 11 11 Investments - other securities. See Part IV, line 11 646,822. 12 871,077. 12 Investments - program-related. See Part IV, line 11 13 13 14 Intangible assets 14 7,861,583. Other assets, See Part IV, line 11 7,819,750. 15 15 196,125,681. 16 197,212,080. Total assets. Add lines 1 through 15 (must equal line 34) 16 Accounts payable and accrued expenses 90,339,532. 17 84,837,717. 17 Grants payable 18 18 31,402,766. 19 Deferred revenue 46,580,520. 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 47,121,100. 43,138,412. Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 2,312,080. 25 6,623,905. Total liabilities. Add lines 17 through 25 171,175,478. 181,180,554. Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances -31,779,579. Unrestricted net assets -36,276,779. 27 11,398,818. Temporarily restricted net assets 28 5,268,615. Permanently restricted net assets 45,330,964. 47,039,690. 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 24,950,203. 16,031,526. Total liabilities and net assets/fund balances 196,125,681. 34 197,212,080.

| Pa | rt XI Reconciliation of Net Assets | | | | | id |
|----|--|----------|------|-------|-------|---------|
| _ | Check if Schedule O contains a response or note to any line in this Part XI | | | | | X |
| | | | | | | has all |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 352, | 55 | 0,8 | 64. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 355, | | | |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | -2, | | | |
| 4 | | | | | | 03. |
| 5 | | | | | | 67. |
| 6 | Donated services and use of facilities | 6 | | | | |
| 7 | Investment expenses | 7 | | | | |
| 8 | Prior period adjustments | 8 | | | | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | -1, | 164 | 1.9 | 57. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, | | | | ,,, | |
| | column (B)) | 10 | 16, | 03: | L . 5 | 26. |
| Pa | rt XII Financial Statements and Reporting | | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | | |
| | | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990: Cash X Accrual Other | | | | 6 17 | |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule | D. | | | | - |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | | 2a | | Х |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed | | | | | |
| | separate basis, consolidated basis, or both: | | 1 | 73 | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | 19 | | | |
| b | Were the organization's financial statements audited by an independent accountant? | | | 2b | х | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate | basis, | | | 111 | |
| | consolidated basis, or both: | | | | | |
| | Separate basis Consolidated basis X Both consolidated and separate basis | | | | | 311- |
| C | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the | audit, | | | | |
| | review, or compilation of its financial statements and selection of an independent accountant? | | | 2c | x | |
| | If the organization changed either its oversight process or selection process during the tax year, explain in Scher | | | | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing | | | | | |
| | Act and OMB Circular A-133? | - | | 3a | | Х |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require | ed audit | | | | |
| | or audits, explain why in Schedule O and describe any steps taken to undergo such audits | | | 3b | | |
| | | | F | orm ! | 990 (| 2018) |

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.

Attach to Form 990 or Form 990-EZ,

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

Section 501(c)(4), (5), or (6) organizations: Complete Part III.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

| Name of organization | ame of organization Employer identification number | | | | | | | | |
|--|---|---|---|----------------------------|--|--|--|--|--|
| MATION | NATIONAL RIFLE ASSOCIATION OF AMERICA 53-0116130 | | | | | | | | |
| Part I-A Complete if the or | ganization is exempt under | section 501(c) o | r is a section 527 (| organization. | | | | | |
| Provide a description of the organi Political campaign activity expend Volunteer hours for political campa | itures | | | 4,319,458. 10,000. | | | | | |
| Part I-B Complete if the or | ganization is exempt under | section 501(c)(3) | | | | | | | |
| 1 Enter the amount of any excise tax | | | | \$ | | | | | |
| 2 Enter the amount of any excise tax | incurred by organization managers | under section 4955 | | \$ | | | | | |
| 3 If the organization incurred a section | on 4955 tax, did it file Form 4720 fo | r this year? | | Yes No | | | | | |
| 4a Was a correction made? | | | | Yes No | | | | | |
| b If "Yes," describe in Part IV. Part I-C Complete if the ore | ganization is exempt under | continu E01/a) | voort coeling FOI | 7-1701 | | | | | |
| · · · · · · · · · · · · · · · · · · · | | | | 13.1.2.5.13-12 | | | | | |
| 1 Enter the amount directly expende2 Enter the amount of the filing organ | | | | \$ 785,548. | | | | | |
| | | • | | s 0. | | | | | |
| 3 Total exempt function expenditure | | | | Φ. | | | | | |
| | | | * | \$ 785,548. | | | | | |
| 4 Did the filing organization file Form | 1120-POL for this year? | | | X Yes No | | | | | |
| contributions received that were p | mployer identification number (EIN) ation listed, enter the amount paid fi romptly and directly delivered to a s additional space is needed, provide | rom the filing organizat eparate political organ | tion's funds. Also enter ization, such as a separ | the amount of political | | | | | |
| (a) Name | (b) Address | (c) EIN | (d) Amount paid from filing organization's funds. If none, enter -0 | contributions received and | | | | | |
| REPUBLICAN ATTORNEYS | | 46 4504545 | 0.5.000 | | | | | | |
| <u>GENERAL ASSOCI</u> REPUBLICAN GOVERNORS | 20006 | 46-4501717 | 85,000 | 0. | | | | | |
| ASSOCIATION | 20006 | 11-3655877 | 135,000 | | | | | | |
| COLORADO REPUBLICAN | GREENWOOD | 11-3033077 | 133,000 | 0. | | | | | |
| COMMITTEE | VILLAGE, CO 80111 | 84-0690399 | 120 | 0. | | | | | |
| NRA POLITICAL | | | | | | | | | |
| VICTORY FUND (SEE PA | FAIRFAX, VA 22030 | 52-1083020 | 0 | 3,078. | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

| Schedule C (Form 990 or 990-EZ) 2018 N Part II-A Complete if the orga | IATIO: Inizatio | NAL RI n is exer | FLE ASSOCIA npt under section | TION OF AMER 1501(c)(3) and file | ICA 53- Form 5768 (el | 0116130 Page 2 ection under |
|--|--------------------|--|---|---|----------------------------------|--------------------------------|
| section 501(h)). | | | | | | |
| A Check 🕨 🗌 if the filing organizati | on belon | gs to an affi | liated group (and list ir | n Part IV each affiliated g | roup member's nan | ne, address, EIN, |
| expenses, and share | of exces | s lobbying | expenditures). | | | |
| B Check if the filing organizati | ion check | ed box A a | nd "limited control" pro | visions apply. | | |
| | | oying Expe eans amou | nditures ınts paid or incurred.) | | (a) Filing organization's totals | (b) Affiliated group totals |
| 1a Total lobbying expenditures to influe | ence pub | lic opinion (| grass roots Johnving) | | | 1 |
| b Total lobbying expenditures to influe | | | | | | |
| c Total lobbying expenditures (add lin | - | • | | | | |
| d Other exempt purpose expenditures | | | | Г | | |
| e Total exempt purpose experioritures | | | N | | | |
| | | | | | | |
| f Lobbying nontaxable amount. Enter | 15.555 | | | | | |
| If the amount on line 1e, column (a) or | (D) IS: | | bying nontaxable am | | | |
| Not over \$500,000 | | | the amount on line 1e. | | | |
| Over \$500,000 but not over \$1,000, | | | 00 plus 15% of the exc | | | |
| Over \$1,000,000 but not over \$1,50 | 0,000 | \$175,000 plus 10% of the excess over \$1,000,000. | | | | |
| Over \$1,500,000 but not over \$17,0 | 00,000 | \$225,000 plus 5% of the excess over \$1,500,000. | | | | |
| Over \$17,000,000 | | \$1,000,000. | | | | |
| | | | | | THE YEAR OF THE | |
| g Grassroots nontaxable amount (ente | er 25% of | line 1f) | *************************************** | | | |
| h Subtract line 1g from line 1a. If zero | or less, e | nter -0- | | | | |
| i Subtract line 1f from line 1c. If zero | or less, e | nter -0 | | | | |
| j If there is an amount other than zero | on eithe | r line 1h or | line 1i, did the organiza | ation file Form 4720 | | |
| reporting section 4911 tax for this ye | | | | | | Yes No |
| (Some organizations that | | 4-Year Ave a section 5 | eraging Period Under | Section 501(h) have to complete all of | | |
| | Lobi | ying Expe | nditures During 4-Yea | ar Averaging Period | | |
| Calendar year (or fiscal year beginning in) | (a) | 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) Total |
| 2a Lobbying nontaxable amount | | | | | | |
| b Lobbying ceiling amount (150% of line 2a, column(e)) | | | | | | |
| c Total lobbying expenditures | | | | | | |
| d Gracerota portavable amount | | | | | | |
| d Grassroots nontaxable amount | - 52 | 9900 | - 1 | IIII LANGE LEANN | | |
| e Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | | |
| f Grassroots lobbying expenditures | | | | | | |

Schedule C (Form 990 or 990-EZ) 2018

Schedule C (Form 990 or 990-EZ) 2018 NATIONAL RIFLE ASSOCIATION OF AMERICA 53-01161 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

| For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description | | (a) | | (b) | |
|--|--|---|---------------|------------|----------|
| | During the year, did the filing organization attempt to influence foreign, national, state, or | | No | Amount | |
| 1 | During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: | | | | |
| a | Volunteers? | | | | |
| C | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? | | | | |
| d | Mailings to members, legislators, or the public? | | | | |
| е | Publications, or published or broadcast statements? | | | | |
| f | Grants to other organizations for lobbying purposes? | | | | |
| g | | | | | |
| h | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | | | |
| i | Other activities? | | | | |
| j | Total. Add lines 1c through 1i | | | | |
| 2a | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | | | |
| | If "Yes," enter the amount of any tax incurred under section 4912 | UEN ET | | | |
| C | If "Yes," enter the amount of any tax incurred by organization managers under section 4912 | 75.3 | W 32 | | |
| | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | | | 0110 |
| aı | t III-A Complete if the organization is exempt under section 501(c)(4), sectio 501(c)(6). | n 501(c)(5 |), or sect | ion | |
| | 301(0)(0). | | | Yes | AL. |
| 1 | Were substantially all (00% or mars) dues received pendeductible by marsh are 0 | | | | No |
| 2 | Were substantially all (90% or more) dues received nondeductible by members? | | | X | |
| 3 | Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? | | | | <u> </u> |
| | 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." | | | II-A, line | 3, is |
| 1 | Dues, assessments and similar amounts from members | | 1 | | |
| 2 | Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political | al | | | |
| | expenses for which the section 527(f) tax was paid). | | | | |
| а | Current year | | . 2a | | |
| b | Carryover from last year | | . 2b | | |
| C | Total | | . 2c | | |
| 3 | Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | | | | |
| 4 | If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce | ess | | | |
| | does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po | litical | | | |
| | expenditure next year? | • | . 4 | | |
| 5_ | | | 5 | | |
| | t IV Supplemental Information | | | | |
| | de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group | list); Part II-A | , lines 1 and | d 2 (see | |
| | ctions); and Part II-B, line 1. Also, complete this part for any additional information. | | | | |
| AF | T I-A, LINE 1: | | | | |
| | | | | | |
| UE | PORT FOR FUNDRAISING AND ADMINISTRATIVE EXPENSES OF | A SEP | ARATE | | |
| ΕG | REGATED FUND IS INDUSTRY STANDARD FOR NONPROFIT ORG | ል ነነተ ፖ. ልጥ | TONG I. | דעה | |
| | | | _0110 11 | | |
| .ı.c | NRA, AS ALLOWED BY LAW. IN 2018, THE NRA PAID \$4,3 | 19,459 | | | |
| UN | DRAISING AND ADMINISTRATIVE EXPENSES FOR THE SEPARA | TE SEG | REGATE | D | |
| JŅ | D, NRA POLITICAL VICTORY FUND, AS ALLOWED BY LAW. T | HE NRA | ENGAG | ED IN | |
| | | | | | |

PART I-C CONTINUATION FOR INCOMPLETE NAME/ADDRESS INFORMATION:

REPUBLICAN ATTORNEYS GENERAL ASSOCIATION

1747 PENNSYLVANIA AVE NW STE 800 WASHINGTON, DC 20006

REPUBLICAN GOVERNORS ASSOCIATION

1747 PENNSYLVANIA AVE NW STE 250 WASHINGTON, DC 20006

Part IV | Supplemental Information (continued)

COLORADO REPUBLICAN COMMITTEE

59505 S WILLOW DR GREENWOOD VILLAGE, CO 80111

NRA POLITICAL VICTORY FUND (SEE PARTS I-A AND IV)

11250 WAPLES MILL RD FAIRFAX, VA 22030

PART I-C LINE 4

THIS INFORMATION NOTE REGARDS THE NRA'S TAXES. THE NRA SEPARATELY FILES FORM 1120-POL, WHICH IS NOT SUBJECT TO PUBLIC DISCLOSURE. THE FOLLOWING INFORMATION ABOUT TAXES PAID WITH THE NRA'S FORMS 1120-POL IS SHARED HERE ON A VOLUNTARY BASIS AS A SERVICE TO READERS AND TO DEMONSTRATE IN GOOD FAITH THAT THE ORGANIZATION IS A TAXPAYER IN GOOD STANDING. 527(F) PROXY TAX IS PAID ON THE LESSER OF NET INVESTMENT INCOME OR CERTAIN POLITICAL EXPENDITURES AS DEFINED BY THE FEDERAL TAX CODE, SUCH AS WHEN CERTAIN POLITICAL COMMUNICATIONS EXPRESSLY ADVOCATE THE ELECTION OR DEFEAT OF A CANDIDATE AND ARE MADE BY THE NRA ITSELF RATHER THAN BY THE NRA'S SEPARATE THE AMOUNT OF 527 (F) PROXY TAX PAID WITH THE NRA'S 2018 SEGREGATED FUND. FORM 1120-POL WAS \$164,944. HISTORICALLY, NO 527(F) PROXY TAX WAS REQUIRED TO BE PAID FOR 2017; THE AMOUNT OF 527(F) PROXY TAX PAID WITH THE NRA'S 2016 FORM 1120-POL WAS \$20,835; THE AMOUNT PAID WITH THE NRA'S 2015 FORM 1120-POL WAS \$21,817. AS ANOTHER POLITE REMINDER TO REPORTERS AND OTHER READERS, FORM 990 INFORMATION IS NOT NECESSARILY EXPECTED TO TIE TO FEDERAL ELECTION COMMISSION (FEC) REPORTING DUE TO DIFFERENT DEFINITIONS AND EXCLUSIONS IN THE DIFFERENT REGULATORY REGIMES.

PART I-C LINE 5

THE NRA POLITICAL VICTORY FUND, AND AN INDEPENDENT POLITICAL ACTION

COMMITTEE (PAC) OF THE NRA, DIRECTLY RECEIVED CONTRIBUTIONS DURING 2018 OF

| Schedule C (Form 990 or 990-EZ) 2018 NATIONAL RIFLE Part IV Supplemental Information (continued) | ASSOCIATION | OF | AMERICA | 53-0116130 | Page 4 |
|--|-------------|----|---------|------------|--------|
| Continued) | | | | | |
| \$12,938,624. | | | | | |
| | | | | | |
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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.

So to www.irs.gov/Form990 for instructions and the latest information,

2018
Open to Public Inspection

Name of the organization

NATIONAL RIFLE ASSOCIATION OF AMERICA

Employer identification number 53-0116130

| Pa | rt I Organizations Maintaining Donor Advise | d Funds or Other Similar Funds | or Accounts. Complete if the |
|-----|---|---|---|
| | organization answered "Yes" on Form 990, Part IV, lin | | |
| | | (a) Donor advised funds | (b) Funds and other accounts |
| 1 | Total number at end of year | | |
| 2 | Aggregate value of contributions to (during year) | | |
| 3 | Aggregate value of grants from (during year) | | |
| 4 | Aggregate value at end of year | | |
| 5 | Did the organization inform all donors and donor advisors in | writing that the assets held in donor advis | ed funds |
| | are the organization's property, subject to the organization's | exclusive legal control? | Yes No |
| 6 | Did the organization inform all grantees, donors, and donor a | | |
| | for charitable purposes and not for the benefit of the donor of | r donor advisor, or for any other purpose | conferring |
| | impermissible private benefit? | | Yes No |
| Pai | | ganization answered "Yes" on Form 990, | Part IV, line 7. |
| 1 | Purpose(s) of conservation easements held by the organization | on (check all that apply). | |
| | Preservation of land for public use (e.g., recreation or e | ducation) Preservation of a hist | torically important land area |
| | Protection of natural habitat | Preservation of a cer | tified historic structure |
| | Preservation of open space | | |
| 2 | Complete lines 2a through 2d if the organization held a qualif | ied conservation contribution in the form | of a conservation easement on the last |
| | day of the tax year. | | Held at the End of the Tax Year |
| а | Total number of conservation easements | ••••• | 2a |
| b | | | |
| C | | | |
| d | Number of conservation easements included in (c) acquired a | | |
| | listed in the National Register | | |
| 3 | Number of conservation easements modified, transferred, rele | eased, extinguished, or terminated by the | organization during the tax |
| | year - | 20 | |
| 4 | Number of states where property subject to conservation eas | | |
| 5 | Does the organization have a written policy regarding the per | _ | |
| _ | violations, and enforcement of the conservation easements it | *************************************** | Yes No |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting, | handling of violations, and enforcing cons | servation easements during the year |
| _ | | | |
| 7 | Amount of expenses incurred in monitoring, inspecting, hand | ling of violations, and enforcing conserva | tion easements during the year |
| | Deep again apparation account reported on line O(d) of account | | L V (A) (TP) (C) |
| 8 | Does each conservation easement reported on line 2(d) above | | |
| 9 | and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation | | Yes No |
| 9 | include, if applicable, the text of the footnote to the organizati | | |
| | conservation easements. | ion s imancial statements that describes | trie organization's accounting for |
| Par | t III Organizations Maintaining Collections of | Art. Historical Treasures, or Ot | her Similar Assets |
| | Complete if the organization answered "Yes" on Form | | |
| 1a | If the organization elected, as permitted under SFAS 116 (AS | | nent and halance sheet works of art |
| | historical treasures, or other similar assets held for public exh | | |
| | the text of the footnote to its financial statements that describ | | noo of public service, provide, if that Alli, |
| b | If the organization elected, as permitted under SFAS 116 (AS | | and halance sheet works of art, historical |
| | treasures, or other similar assets held for public exhibition, ed | | |
| | relating to these items: | , | and a street provide the following amounts |
| | (i) Revenue included on Form 990, Part VIII, line 1 | | > \$ |
| | | | |
| 2 | If the organization received or held works of art, historical trea | | gain, provide |
| | the following amounts required to be reported under SFAS 11 | | V / F |
| а | Revenue included on Form 990, Part VIII, line 1 | | > \$ |
| | Assets included in Form 990, Part X | | |

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

Schedule D (Form 990) 2018

32,709,031.

| Part VII Investments - Other Securities. | | | |
|--|-----------------------|---------------------------------------|---------------------------------|
| Complete if the organization answered "Yes" on F | Form 900 Part IV li | ne 11h Son Form 990 Dort V line | 10 |
| (a) Description of security or category (including name of security) | (b) Book value | | ost or end-of-year market value |
| (d) Financial dark estima | (b) Book value | (c) Welliod of Valuation. O | ost of end-of-year market value |
| (1) Financial derivatives (2) Closely-held equity interests | | - | |
| (3) Other | | | |
| (A) | | | |
| (B) | | | |
| (C) | | | |
| (D) | | | |
| (E) | | | |
| (F) | | | |
| (G) | | | |
| (H) | | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) | | | |
| Part VIII Investments - Program Related. | | | |
| Complete if the organization answered "Yes" on F | orm 990, Part IV, Iir | ne 11c. See Form 990, Part X, line | 13 |
| (a) Description of investment | (b) Book value | (c) Method of valuation: Co | ost or end-of-year market value |
| (1) | | | |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) (8) | | | |
| (9) | | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) | | | |
| Part IX Other Assets. | | | |
| Complete if the organization answered "Yes" on F | orm 990 Part IV lir | ne 11d See Form 990 Part Y line | 15 |
| | cription | io trai ees teim ees, tarex, inte | (b) Book value |
| (1) | · | | (b) Dook value |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| Total. (Column (b) must equal Form 990. Part X, col. (B) line 15, |) | | |
| Part X Other Liabilities. | | | |
| Complete if the organization answered "Yes" on F | orm 990, Part IV, lir | | (, line 25. |
| 1. (a) Description of liability | | (b) Book value | |
| (1) Federal income taxes |) T | F 000 000 | |
| (2) NOTE PAYABLE - NRA FOUNDATION (3) CAPITAL LEASE ARRANGEMENT |)N | 5,000,000. | |
| (4) DERIVATIVE INSTRUMENT MARKET | n | 1,037,889. | |
| (5) VALUATION | - | 429,922. | |
| (6) ACCRUED SALES AND USE TAXES | | 149,220. | |
| (7) COUPON LIABILITY | | 6,874. | |
| (8) | | 0,0/4. | |
| (9) | | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 25, |) b | 6,623,905. | |
| | | to the organization's financial state | |

| 0-1 | NAMIONAL BIBLE AGGOCTAMION | 0.77 | WEDTO | | | |
|------------|---|-----------------------|-------------------------------------|----------|-------------------|-----------|
| | table D (Form 990) 2018 NATIONAL RIFLE ASSOCIATION table XI Reconciliation of Revenue per Audited Financial Statemen | nte Wi | MERICA | 53- | -0116130 | Page 4 |
| | Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. | | ui nevellue per ne | turn | • | |
| 1 | Total revenue gains and other support per sudited financial statements | | | T a | 252 006 | OFO |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | | 1 | 352,886 | ,958. |
| _ | Net unrealized gains (losses) on investments | 2a | -E 020 267 | | | |
| b | Donated services and use of facilities | Za | -5,029,267. | 155 | | |
| C | Donated services and use of facilities | 2b | | 133 | | |
| | Recoveries of prior year grants Other (Describe in Part XIII.) | | -1,164,957. | - 20 | | |
| | | | | | C 104 | 004 |
| 3 | | | | 2e | -6,194 | |
| 4 | Subtract line 2e from line 1 | | | 3 | 359,081 | ,182. |
| - | • | 1 . 1 | | | | |
| | Investment expenses not included on Form 990, Part VIII, line 7b | | -6,530,318. | | | |
| | Other (Describe in Part XIII.) | | | | 6 500 | 24.0 |
| | Add lines 4a and 4b | | | 4c | | |
| 5 Par | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) XII Reconciliation of Expenses per Audited Financial Stateme | nte W | ith Evnonces new F | 5 | 352,550 | ,864. |
| | Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. | | idi Expelises per F | retur | n. | |
| 1 | Total expenses and losses per audited financial statements | | | 1 | 361,805, | 635 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | | | 501,005, | , 000. |
| | Donated services and use of facilities | 2a | | | | |
| | Prior year adjustments | | | | | |
| С | Other losses | 2c | | | | |
| | Other (Describe in Part XIII.) | | 6,592,651. | | | |
| | Add lines 2a through 2d | | | 2e | 6,592, | 651 |
| 3 | Subtract line 2e from line 1 | | | | 355,212, | 984 |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | *********** | | - | 333 / 212 , | , , , , , |
| | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | | | |
| | Other (Describe in Part XIII.) | | 62,333. | | | |
| | Add lines 4a and 4b | 77 | | 4c | 62 | 333. |
| 5 | Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.) | | | | 355,275, | |
| Par | XIII Supplemental Information. | | | | 333,273, | 317. |
| Provid | e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addit | V, lines ional inf | 1b and 2b; Part V, line 4 ormation. | ; Part : | X, line 2; Part X | l, |
| PAR | r III, LINE 4: | | | | | |
| <u>THI</u> | S RESPONSE DESCRIBES THE MUSEUM COLLECTION | S WH | ICH ARE HELD | вч | THE NRA | 'S |
| REL | ATED ORGANIZATIONS AND CURATED BY NRA EMPL | OYEE | S. THE NRA M | USE | UMS | |
| PRO | MOTE GUN COLLECTING AND PRESERVATION OF HI | STOR | Y THOUGH FIR | EAR | MS. THE | |
| <u>NRA</u> | MUSEUMS INCLUDE THE NATIONAL FIREARMS MUS | EUM | IN FAIRFAX, | VIR | GINIA: T | HE |
| FRA | NK BROWNELL MUSEUM OF THE SOUTHWEST IN RAT | ON, | NEW MEXICO; | AND | THE NRA | |
| <u>NAT</u> | IONAL SPORTING ARMS MUSEUM AT BASS PRO SHO | PS I | N SPRINGFIEL | D, 1 | MISSOURI | • |

TO MAKE THE NRA MUSEUMS THE FINEST POSSIBLE RESOURCE FOR THE PUBLIC, THE

NRA AND ITS AFFILIATED CHARITIES RELY ON GENEROUS SUPPORTERS TO BUILD THE

SIGNIFICANT FOREARMS. PLEASE VISIT NRAMUSEUMS.ORG FOR CURRENT INFORMATION

EXHIBITION AND RESEARCH COLLECTIONS THROUGH COLLECTIONS OF HISTORICALLY

LINE 5 THIS RESPONSE EXPLAINS WHY THE NRA MAY SOLICIT OR RECEIVE ASSETS THAT SOME DONORS INTEND TO BE SOLD RATHER THAN MAINTAINED PERMANENTLY. WHEN DONORS INTEND THEIR GIFTS OF FIREARMS TO BE SOLD RATHER THEN HELD FOR EXHIBITION OR RESEARCH IN THE COLLECTIONS OF THE NRA MUSEUM, THE NRA PARTNERS WITH AUCTION HOUSES. DONORS MAY CHOOSE TO HAVE GUNS SOLD FOR VARIOUS REASONS, SUCH AS TO SUPPORT CURRENT PROGRAM SERVICES OR TO FUND A CHARITABLE GIFT ANNUITY OR CHARITABLE TRUST WITH ONE OF THE NRA'S AFFILIATED CHARITIES. THE PHILANTHROPIC INTENT OF EACH DONOR DETERMINES HOW A GIFT IS HANDLED.

PART V, LINE 4:

THIS RESPONSE DESCRIBES THE INTENDED USES OF THE ORGANIZATION'S ENDOWMENT FUNDS. THE ENDOWMENT FUNDS BENEFIT A DIVERSE RANGE OF PHILANTHROPIC INTERESTS, INCLUDING TRAINING IN MARKSMANSHIP, NATIONAL SHOOTING CHAMPIONSHIPS, WOMEN'S LEADERSHIP, HUNTERS'LEADERSHIP, RECREATIONAL SHOOTING, LAW ENFORCEMENT, NRA MUSEUMS, AND THE NATIONAL ENDOWMENT FOR THE PROTECTION OF THE SECOND AMENDMENT.

PART X, LINE 2:

THIS RESPONSE PROVIDES THE TEXT OF THE FOOTNOTE TO THE ORGANIZATION'S FINANCIAL STATEMENTS IN ACCORDANCE WITH FASB ASC 740. MANAGEMENT EVALUATED THE NRA'S TAX POSITIONS AND CONCLUDED THAT THE NRA HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE. GENERALLY, THE NRA IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE U.S. FEDERAL, STATE, OR LOCAL AUTHORITIES FOR YEARS BEFORE 2015, WHICH IS THE STANDARD STATUTE OF LIMITATIONS LOOKBACK PERIOD.

| Schedule D (Form 990) 2018 NATIONAL RIFLE ASSOCIATION OF AMERICA Part XIII Supplemental Information (continued) | 53-0116130 Page 5 |
|---|-------------------|
| Supplemental information (continued) | |
| PART XI, LINE 2D - OTHER ADJUSTMENTS: | |
| AGENCY TRANSACTIONS BETWEEN THE NRA AND NRA FOUNDATION | -1,910,739. |
| UNREALIZED GAIN ON DERIVATIVE INSTRUMENT | 745,782. |
| TOTAL TO SCHEDULE D, PART XI, LINE 2D | -1,164,957. |
| | |
| PART XI, LINE 4B - OTHER ADJUSTMENTS: | |
| COST OF GOODS SOLD | -4,389,150. |
| RENTAL EXPENSE | -2,203,501. |
| INTEREST ON ENDOWMENT GRANTS | 62,333. |
| TOTAL TO SCHEDULE D, PART XI, LINE 4B | -6,530,318. |
| | |
| PART XII, LINE 2D - OTHER ADJUSTMENTS: | |
| COST OF GOODS SOLD | 4,389,150. |
| RENTAL EXPENSE | 2,203,501. |
| TOTAL TO SCHEDULE D, PART XII, LINE 2D | 6,592,651. |
| | |
| PART XII, LINE 4B - OTHER ADJUSTMENTS: | , |
| INTEREST ON ENDOWMENT GRANTS | 62,333. |
| | |
| PART X | |
| LINE 1(4) THIS INFORMATIONAL NOTE PROVIDES CONTEXT FOR THE DI | ERIVATIVE |
| FINANCIALS INSTRUMENT DISCLOSED AS A LIABILITY. INTEREST RATI | E SWAPS ARE |
| ENTERED INTO TO MANAGE INTEREST RATE RISKS ASSOCIATED WITH T | HE NRA'S |
| BORROWING, AND INTEREST RATE SWAPS ARE ACCOUNTED FOR IN ACCOUNTED | RDANCE WITH |
| FASB ASC 815. THE NRA'S INTEREST RATE SWAP IS RECORDED IN THI | E BALANCE |
| SHEET AT FAIR VALUE, WITH FAIR VALUE CHANGES RECORDED AS UNRI | EALIZED GAIN |
| OR LOSS ON DERIVATIVE INSTRUMENT. AS OF MARCH 2019, THE NRA I | NO LONGER HAS |

Schedule D (Form 990) 2018

| Schedule D (Form 990) 2018 NATIONAL RIFLE ASSOCIATION OF AMERICA 53-0116130 Page 5 Part XIII Supplemental Information (continued) |
|---|
| AN INTEREST RATE SWAP ARRANGEMENT. |
| |
| LINE 1(6) THIS INFORMATIONAL NOTE REGARDS THE NRA'S TAXES. THE NRA IS A |
| SUBSTANTIAL TAXPAYER AND REMAINS IN GOOD STANDING WITH THE TAX |
| AUTHORITIES. STATE AND LOCAL TAXES PAID BY THE NRA INCLUDE SALES AND USE |
| TAXES, REAL ESTATE AND PERSONAL PROPERTY TAXES, AMUSEMENT TAXES, AND STATE |
| UNEMPLOYMENT TAXES. THE LIABILITY SHOWN ON SCHEDULE D, PART X FOR ACCRUED |
| SALES AND USE TAXES RELATES TO TIMING AND IS A SMALL FRACTION OF TAXES |
| PAID DURING THE YEAR. ADDITIONAL NOTES REGARDING THE NRA'S TAXES ARE |
| SHARED ON SCHEDULE C REGARDING 527(F) PROXY TAXES AND ON SCHEDULE O |
| REGRADING UNRELATED BUSINESS INCOME TAXES. THE NRA CHOOSES TO SHARE THIS |
| ADDITIONAL INFORMATION ABOUT THE NRA'S TOTAL TAXES TO DEMONSTRATE IN GOOD |
| FAITH THAT THE ORGANIZATION IS A TAXPAYER IN GOOD STANDING. |
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SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

2018
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

| NATIONAL RIFLE | | | | | 53-011613 | 0 | | | | |
|---|---|------------------------------|--|-----------------|----------------------|---------------------|--|--|--|--|
| Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. | | | | | | | | | | |
| | | | | | | | | | | |
| | | | ds to substantiate the amount of its gra | | | | | | | |
| the grantees' eligibility to | the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No | | | | | | | | | |
| 2 For grantmakers. Desc | rihe in Part \/ the | organization's | procedures for monitoring the use of its | aranto and at | har agaistanas autoi | -l- # | | | | |
| United States. | inde iiii ait v tiie | o organization s | procedures for mornioring the use of its | s grants and ot | ner assistance outsi | de ine | | | | |
| | | | | | | | | | | |
| (a) Region | (b) Number of | (c) Number of | (d) Activities conducted in the region | | vity listed in (d) | (f) Total | | | | |
| | offices | emplovees. | (by type) (such as, fundraising, pro- | | gram service, | expenditures | | | | |
| | in the region | agents, and independent | gram services, investments, grants to | | specific type | for and investments | | | | |
| | | contractors in the region | recipients located in the region) | of service | (s) in the region | in the region | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| CENTRAL AMERICA AND | | | | | | | | | | |
| THE CARIBBEAN | 0 | 0 | INVESTMENTS | | | 3,021,000. | | | | |
| | | | | | | | | | | |
| CTITED 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | | | | | | | | | |
| CENTRAL AMERICA AND | | | | | | | | | | |
| THE CARIBBEAN | 0 | 0 | PROGRAM SERVICES | PUBLICATION | S | 4,000. | | | | |
| | | II. | | | | | | | | |
| EAST ASIA AND THE | | | | | | | | | | |
| PACIFIC | 0 | 0 | PROGRAM SERVICES | PUBLICATION | s | 5,000. | | | | |
| | | | | | | 3,000. | | | | |
| | | | | | | | | | | |
| EUROPE (INCLUDING | | | | | | | | | | |
| ICELAND & GREENLAND) | 0 | 0 | FUNDRAISING | | | 9,000. | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| EUROPE (INCLUDING | | | | | | | | | | |
| ICELAND & GREENLAND) | 0 | 0 | PROGRAM SERVICES | PUBLICATION | S | 21,000. | | | | |
| | | | | | | | | | | |
| ALDDIE ENGE SND | | | | | | | | | | |
| MIDDLE EAST AND | 0 | 0 | ETINDRA I CING | | | | | | | |
| NORTH AFRICA | U | 0 | FUNDRAISING | | | 5,000. | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| NORTH AMERICA | 0 | 0 | FUNDRAISING | | | 6,000. | | | | |
| | | | | | | 0,000 | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| NORTH AMERICA | 0 | 0 | PROGRAM SERVICES | PUBLICATION | s | 10,000. | | | | |
| 3 a Subtotal | 0 | 0 | | | | 3,081,000. | | | | |
| b Total from continuation | | | | | | | | | | |
| sheets to Part I | 0 | 0 | | | 7. X. Mi. GA | 56,000. | | | | |
| c Totals (add lines 3a | | | | | | | | | | |
| and 3b) | 0 | 0 | | | | 3,137,000. | | | | |

| Schedule F (Form 990) Part I Continuatio | NATIONAL n of Activitie | RIFLE A | SSOCIATION OF AMERICAL (Schedule F (Form 990), Part I, line 3 | CA 53-011613 | 0 Page 1 |
|---|---|--|--|--|---|
| (a) Region | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in region | (f) Total expenditures for region |
| NORTH AMERICA | | | PROGRAM SERVICES | NRA OUTDOORS | 37,000. |
| SOUTH AMERICA | 0 | 0 | FUNDRAISING | | 4,000. |
| SOUTH AMERICA | 0 | 0 | PROGRAM SERVICES | PUBLICATIONS | 8,000. |
| SUB-SAHARAN AFRICA | | | PROGRAM SERVICES | NRA OUTDOORS | 7,000. |
| | | | | | |
| | | | | | |
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| | | | | | |
| | | | | | |
| | | | | | |
| Totals | | | | THE SUPERIOR | 56,000. |

Schedule F (Form 990) 2018

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

| (a) Name of organization and EIN (if applicable) | | | | | 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter |
|--|--|--|--|---------|--|
| cable) (c) Region | | | | - n - 1 | zations listed above that are r r counsel has provided a sect |
| (d) Purpose of grant | | | | | ecognized as charities by the fion 501(c)(3) equivalency letter |
| (e) Amount of cash grant | | | | | foreign country, re |
| (f) Manner of cash disbursement | | | | | ecognized as tax-exe |
| (g) Amount of noncash assistance | | | | | ımpt 🔻 |
| (h) Description of noncash assistance | | | | | |
| (i) Method of valuation (book, FMV appraisal, other) | | | | | |

53-0116130

NATIONAL RIFLE ASSOCIATION OF AMERICA

Schedule F (Form 990) 2018

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

| (h) Method of valuation (book, FMV, appraisal, other) | | | | | |
|---|--|--|--|--|--|
| (g) Description of noncash assistance | | | | | |
| (f) Amount of noncash assistance | | | | | |
| (e) Manner of cash disbursement | | | | | |
| (d) Amount of cash grant | | | | | |
| (c) Number of recipients | | | | | |
| (b) Region | | | | | |
| (a) Type of grant or assistance | | | | | |

Schedule F (Form 990) 2018

Part IV | Foreign Forms 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes." the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) Yes X No Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization 2 may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign 3 Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes." the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471) Was the organization a direct or indirect shareholder of a passive foreign investment company or a 4 qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621. Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621) Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," 5 the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865) 6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990) Yes X No

Schedule F (Form 990) 2018

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 3:

THE NRA'S OFFSHORE INVESTMENTS FOLLOW INDUSTRY STANDARD BEST PRACTICES IN RISK MANAGEMENT FOR NATIONAL NONPROFIT INSTITUTIONAL INVESTORS. ALTERNATIVE INVESTMENTS REDUCE OVERALL PORTFOLIO RISK BY REDUCING VOLATILITY AND IMPROVING DIVERSIFICATION. THE NRA MAINTAINS SEVERAL INVESTMENT ACCOUNTS THAT ARE MULTI-STRATEGY FUNDS OF FUNDS. INCOME FROM PASSIVE INVESTMENTS, WHEN APPROPRIATELY STRUCTURED, IS EXCLUDED FROM UNRELATED BUSINESS INCOME BY LAW. THIS TYPE OF INVESTMENT POSTURE IS COMMONLY ACCEPTED IN THE U.S. EXEMPT ORGANIZATION INDUSTRY. 100% OF THE AMOUNT IS THE TOTAL BOOK VALUE OF INVESTMENTS FOR THAT REGION.

SCHEDULE F, PART I, LINE 3

THIS DISCLOSURE REFERS TO FOREIGN FUNDRAISING. 100% OF THE AMOUNT IS THE CASH VALUE OF EXPENDITURES MADE BY THE NRA FOR NECESSARY TRAVEL, ACCOMMODATIONS, AND RELATED EXPENSES.

THIS DISCLOSURE OF PROGRAM SERVICES REFERS TO NRA PUBLICATIONS DIVISION'S FOREIGN TRAVEL EXPENSES RELATING TO GATHERING MATERIALS FOR NRA MAGAZINES. 100% OF THE AMOUNT IS THE CASH VALUE OF EXPENDITURES MADE BY THE NRA FOR NECESSARY TRAVEL, ACCOMMODATIONS, AND RELATED EXPENSES.

SCHEDULE G

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization

Employer identification number

| NATIONAL RIFLE ASSOCIATION OF AMERICA 53-0116130 | | | | | | | | |
|--|--|---|--|-----------------------------------|--|---|--|--|
| Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not | | | | | | | | |
| required to complete this part. | | | | | | | | |
| 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a X Mail solicitations b X Internet and email solicitations f Solicitation of government grants c X Phone solicitations g Special fundraising events | | | | | | | | |
| d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? | | | | | | | | |
| (i) Name and address of individual or entity (fundraiser) | (ii) Activity | (iii) fundi have c or cor contrib | Did raiser ustody itrol of utions? | (iv) Gross receipts from activity | (v) Amount paid to (or retained by) fundraiser listed in col. (i) | (vi) Amount paid to (or retained by) organization | | |
| ALLEGIANCE DBA MEMBERSHIP | | Yes | No | | | | | |
| ADVISORS - 11250 WAPLES MILL | FUNDRAISING CONSULTANT | | х | 42,370,456. | 1,070,000. | 41,300,456. | | |
| INFOCISION MANAGEMENT CORP - | | | | | | | | |
| 325 SPRINGSIDE DR, AKRON, OH | PAID SOLICITOR | | х | 9,521,431. | 4,840,658. | 4,680,773. | | |
| 501C SOLUTIONS - 2530 | | | | | | | | |
| MERIDIAN PKWY STE 300, | FUNDRAISING CONSULTANT | | Х | 0. | 616,000. | 0. | | |
| SHARPE GROUP - 855 RIDGE LAKE | C ₀ .9c | | | | | | | |
| BLVD STE 300, MEMPHIS, TN | FUNDRAISING CONSULTANT | | Х | 0, | 480,000. | 0. | | |
| HWS CONSULTING - 221 HOMEPORT | | | | | | | | |
| DR, GRASONVILLE, MD 21638 | FUNDRAISING CONSULTANT | | Х | 0. | 360,000. | 0. | | |
| MCKENNA & ASSOCIATES - 2000 | | | | | | | | |
| CALRENDON BLVD STE 200, | FUNDRAISING CONSULTANT | | X | 0. | 300,000. | 0. | | |
| KEY & ASSOCIATES - 12176 | | | | | | | | |
| CHANCERY STATION CIR, RESTON, | FUNDRAISING CONSULTANT | _ | Х | 0. | 72,000. | 0 | | |
| COMMONWEALTH GROUP PARTNERS - | | | | | | | | |
| 1579 MONROE SR STE F-341, | FUNDRAISING CONSULTANT | | Х | 0. | 60,000. | 0. | | |
| | | | | | | | | |
| Total 51,891,887. 7,798,658. 45,981,22: 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration | | | | | | | | |
| or licensing. | is registered or most issue to confirm | ,0111110 | 2110113 | or rias been notified | ır ıs exempt irom reç | Jistration | | |
| AL, AK, AZ, AR, CA, CO, CT, | FL,DC,GA,HI,IL,KS,F | XY.I | A . M | IA.MD.ME.MT | MN MO MS 1 | NC ND NH | | |
| AL, AK, AZ, AR, CA, CO, CT, FL, DC, GA, HI, IL, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, NC, ND, NH NJ, NM, NY, OK, OH, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV | | | | | | | | |
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Schedule G (Form 990 or 990-EZ) 2018 NATIONAL RIFLE ASSOCIATION OF AMERICA 53-0116130 Page 2 Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events NONE (add col. (a) through NRAILA col. (c)) (event type) (event type) (total number) 1,403,289. Gross receipts 1,403,289. 2 Less: Contributions 3 Gross income (line 1 minus line 2) 1,403,289. 1,403,289. Cash prizes Noncash prizes Direct Expenses 54,440. Rent/facility costs 54,440. 154,712. Food and beverages 154,712. 38,776. 8 Entertainment 38,776. 48,318. 9 Other direct expenses 48,318. 10 Direct expense summary, Add lines 4 through 9 in column (d) 296,246. 11 Net income summary. Subtract line 10 from line 3, column (d) 1,107,043. Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (a) Bingo Revenue (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs 4 Other direct expenses 5 Yes Yes Yes Volunteer labor No No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? b If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes

b If "Yes," explain: __

| Sch | edule G (Form 990 or 990-EZ) 2018 NATIONAL RIFLE ASSOCIATION OF AMERICA 53-0 | 116130 | Page 3 |
|------------------|---|-------------------|---------|
| 11 | Does the organization conduct gaming activities with nonmembers? | Yes | No |
| 12 | Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed | | |
| | to administer charitable gaming? | Yes | No |
| 13 | Indicate the percentage of gaming activity conducted in: | | |
| а | The organization's facility | 13a | % |
| b | An outside facility | 13b | % |
| 14 | Enter the name and address of the person who prepares the organization's gaming/special events books and records: | | |
| | Name | | |
| | Address | | |
| | Does the organization have a contract with a third party from whom the organization receives gaming revenue? | Yes | ☐ No |
| þ | If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount | | |
| | of gaming revenue retained by the third party > \$ | | |
| C | If "Yes," enter name and address of the third party: | | |
| | Name | | |
| | Address > | | |
| 16 | Gaming manager information: | | |
| | Name | | |
| | Gaming manager compensation > \$ | | |
| | Description of services provided 🕨 | | |
| | | | |
| | | | |
| | Director/officer Employee Independent contractor | | |
| | Mandatory distributions: | | |
| а | Is the organization required under state law to make charitable distributions from the gaming proceeds to | | |
| | | Yes | No |
| b | Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the | | |
| D | organization's own exempt activities during the tax year > \$ | | |
| Pai | Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions. | : III, lines 9, 9 | b, 10b, |
| a a i | UEDIUE A DADE I LINE AD LIGH OF HIM WIGHTON DAID DEPOSIT | | |
| SCI | HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS | : | |
| | | | |
| (I) | NAME OF FUNDRAISER: ALLEGIANCE DBA MEMBERSHIP ADVISORS | | |
| / - 1 | ADDDEGG OF EINIDDATGED 11050 WILLIAM | | |
| <u>(I</u>) |) ADDRESS OF FUNDRAISER: 11250 WAPLES MILL RD, FAIRFAX, VA 220 | 30 | |
| | | | |
| | | | |
| (I) | NAME OF FUNDRAISER: INFOCISION MANAGEMENT CORP | | |
| (I) | ADDRESS OF FUNDRAISER: 325 SPRINGSIDE DR, AKRON, OH 44333 | | |
| | | | |
| (I) | NAME OF FUNDRAISER: 501C SOLUTIONS | | |
| <u>, - /</u> | A THEFT OF TOURSETPHIC, DATE DOUGLICHS | | |

| Schedule G (Form 990 or 990-EZ) NATIONAL RIFLE ASSOCIATION OF AMERICA 53-0116130 Page 4 Part IV Supplemental Information (continued) |
|--|
| (I) ADDRESS OF FUNDRAISER: |
| 2530 MERIDIAN PKWY STE 300, RESEARCH TRIANGLE PARK , NC 27713 |
| (I) NAME OF FUNDRAISER: SHARPE GROUP |
| (I) ADDRESS OF FUNDRAISER: 855 RIDGE LAKE BLVD STE 300, MEMPHIS, TN 38120 |
| (I) NAME OF FUNDRAISER: MCKENNA & ASSOCIATES |
| (I) ADDRESS OF FUNDRAISER: |
| 2000 CALRENDON BLVD STE 200, ARLINGTON, VA 22201 |
| (I) NAME OF FUNDRAISER: KEY & ASSOCIATES |
| (I) ADDRESS OF FUNDRAISER: 12176 CHANCERY STATION CIR, RESTON, VA 20190 |
| (I) NAME OF FUNDRAISER: COMMONWEALTH GROUP PARTNERS |
| (I) ADDRESS OF FUNDRAISER: 1579 MONROE SR STE F-341, ATLANTA, GA 30324 |
| PART I LINE 2B(2) |
| THIS SUPPLEMENTAL INFORMATION NOTES THE DISTINCTION BETWEEN 990 CORE |
| FORM PART VIII SECTION B LINE 1 AND SCHEDULE G PART I LINE 2B(2) FOR |
| THE FILING ORGANIZATION'S VENDOR INFOCISION MANAGEMENT CORP. THE VENDOR |
| INFOCISION PROVIDED SERVICES TO THE FILING ORGANIZATION FOR BOTH |
| MEMBERSHIPS AND CONTRIBUTIONS SOLICITATIONS, AS SHOWN ON 990 CORE FORM |
| PART VIII SECTION B LINE 1. SCHEDULE G IS SPECIFIC TO THE VENDOR'S WORK |
| AS A PAID SOLICITOR PROVIDING PROFESSIONAL FUNDRAISING SERVICES. |
| THEREFORE, THE SCHEDULE G DISCLOSURE EXCLUDES THE MEMBERSHIP PROCESSING |
| SERVICES. |

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

Open to Public

Inspection

OMB No. 1545-0047

Go to www.irs.gov/Form990 for the latest information.

| Name of the organization NATIONAL RIFLE ASSOCIATION | RIFIE ASS | OCTATION OF | AMERICA | | | | Employer identification number |
|--|------------------------|------------------------------------|--------------------------|---|---|--|---------------------------------------|
| Part I General Information on Grants and Assistance | ind Assistance | | | | | | |
| 1 Does the organization maintain records to substantiate the amount of the grants or assistance, and the selection | to substantiate the | amount of the grants | or assistance, the | grantees' eligibility | for the grants or assis | stance, and the selecti | on |
| criteria used to award the grants or assistance? | stance? | | | | | | X Yes No |
| 낋 | ocedures for monif | toring the use of grant | funds in the United | States. | | | |
| Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. | Domestic Organi | zations and Domestic | | complete if the orga | anization answered "Y | Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any | : IV, line 21, for any |
| recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. | \$5,000. Part II can | be duplicated if addition | onal space is need | ed. | | | |
| 1 (a) Name and address of organization or government | (p) EIN | (c) IRC section (if applicable) | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of noncash assistance | (h) Purpose of grant or assistance |
| NATIONAL FOUNDATION FOR WOMEN | | | | | | | |
| LEGISLATORS - 910 16TH ST NW - WASHINGTON, DC 20006 | 52-1480785 | 501(c)(3) | 13,328. | 0 | | | UNDERGRADUATE COLLEGE |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table | nd government org | anizations listed in the | line 1 table | | | | 1.1 |
| 3 Enter total number of other organizations listed in the line 1 table | s listed in the line 1 | table | | | | | 0.0 |
| LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. | , see the Instructi | ons for Form 990. | | | | | Schedule I (Form 990) (2018) |

Page 2

53-0116130

Schedule I (Form 990) (2018)

Part III Grants and Other

(Form 990) (2018) NATIONAL RIFLE ASSOCIATION OF AMERICA Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non- cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of noncash assistance |
|---|--------------------------|--------------------------|--|---|---------------------------------------|
| NRA JEANNE E BRAY MEMORIAL SCHOLARSHIP AWARDS | 20 | 62,333, | 0 | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Part IV Supplemental Information. Provide the information required in | | e 2; Part III, column | Part I, line 2; Part III, column (b); and any other additional information | ditional information. | |
| PART I, LINE 2: | | | | | |
| PART I LINE 2 THE NATIONAL FOUNDATION | - 1 | FOR WOMEN LEGISLATORS | - 1 | PARTNERS WITH | |
| THE NATIONAL RIFLE ASSOCIATION FOR | THE | ANNUAL NFWL/NRA | BILL OF | RIGHTS ESSAY | |
| SCHOLARSHIP CONTEST FOR FEMALE HIGH | | SCHOOL JUNIORS AND | D SENIORS. | THE NRA | |
| ACTIVELY ASSISTS NATIONAL FOUNDATION OF | | WOMEN LEGISLATORS | TORS IN THE | E SELECTION | |
| AND ADMINISTRATION OF NFWL SCHOLARSHIPS | SHIPS FOR | COLLEGE. | NFWL SCHOLA | SCHOLARSHIP | |
| APPLICATIONS ARE ASSESSED ON THE ELEMENTS | EMENTS OF | F HISTORIC | HISTORICAL RESEARCH, | H, INSIGHT | |
| AND PERSPECTIVE, DEMONSTRATED UNDERSTANDING | RSTANDING | OF THE | AMERICAN CONSTITUTION, | STITUTION, | |
| INSPIRATIONAL QUALITY, AND MEANINGFUL PERSONAL CONNECTION. | TUL PERSO | NAL CONNEC | - 1 | SCHOLARSHIP | |
| | | | | | |

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Part I

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

NATIONAL RIFLE ASSOCIATION OF AMERICA **Questions Regarding Compensation**

Employer identification number 53-0116130

| | | | Yes | No |
|----|--|--|------|-------|
| 1a | a Check the appropriate box(es) if the organization provided any of the fo | | | 10.17 |
| | Part VII, Section A, line 1a. Complete Part III to provide any relevant info | | 1 | |
| | X First-class or charter travel | lousing allowance or residence for personal use | | |
| | | ayments for business use of personal residence | | 3 |
| | X Tax indemnification and gross-up payments | lealth or social club dues or initiation fees | | 120 |
| | Discretionary spending account | ersonal services (such as maid, chauffeur, chef) | | Hit |
| b | If any of the boxes on line 1a are checked, did the organization follow a | | | |
| | reimbursement or provision of all of the expenses described above? If " | | X | |
| 2 | J | | | |
| | trustees, and officers, including the CEO/Executive Director, regarding t | he items checked on line 1a?2 | Х | |
| 3 | Indicate which, if any, of the following the filing organization used to est | ablish the compensation of the organization's | | |
| • | CEO/Executive Director. Check all that apply. Do not check any boxes f | | | - 19 |
| | establish compensation of the CEO/Executive Director, but explain in Pa | | | 1 5 |
| | · — | /ritten employment contract | | 3.0 |
| | | compensation survey or study | | 116 |
| | | pproval by the board or compensation committee | - | |
| | To this organizations | pproval by the board of compensation committee | - | 3.0 |
| 4 | During the year, did any person listed on Form 990, Part VII, Section A, | line 1a, with respect to the filing | | 113 |
| | organization or a related organization: | | 100 | |
| | Receive a severance payment or change-of-control payment? | 4a | X | |
| b | Participate in, or receive payment from, a supplemental nonqualified reti | irement plan?4b | X | |
| C | Participate in, or receive payment from, an equity-based compensation | arrangement?4c | | X |
| | If "Yes" to any of lines 4a-c, list the persons and provide the applicable a | amounts for each item in Part III. | | |
| | Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must c | complete lines 5-9. | | |
| 5 | For persons listed on Form 990, Part VII, Section A, line 1a, did the orga | | | La P |
| | contingent on the revenues of: | | | 4 = 1 |
| а | The organization? | 5a | | х |
| b | Any related organization? | 5b | | X |
| | If "Yes" on line 5a or 5b, describe in Part III. | | | |
| 6 | For persons listed on Form 990, Part VII, Section A, line 1a, did the orga | nization pay or accrue any compensation | 1-3 | |
| | contingent on the net earnings of: | | | |
| а | The organization? | 6a | | х |
| | Any related organization? | | | X |
| | If "Yes" on line 6a or 6b, describe in Part III. | 45 | 2011 | |
| 7 | | nization provide any nonfixed payments | | 1.5 |
| | not described on lines 5 and 6? If "Yes," describe in Part III | | | х |
| 8 | Were any amounts reported on Form 990, Part VII, paid or accrued purs | uant to a contract that was subject to the | | |
| | initial contract exception described in Regulations section 53.4958-4(a)(| | | х |
| 9 | If "Yes" on line 8, did the organization also follow the rebuttable presum | | TIV. | |
| | Regulations section 53.4958-6(c)? | | | |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii), Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

| | | (B) Breakdown of W-2 | | and/or 1099-MISC compensation | (C) Retirement and | (D) Nontaxable | (E) Total of columns | (F) Compensation |
|--------------------------------------|---|--------------------------|-------------------------------------|-------------------------------------|--------------------|----------------|----------------------|--|
| (A) Name and Title | | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | compensation | benefits | (a)-(i)(a) | in column (B) reported as deferred on prior Form 990 |
| (1) WAYNE LAPIERRE | 8 | 1,267,878. | 455,000. | 427,756. | 20,280. | 53,513. | 2,224,427. | 0. |
| CEO AND EXECUTIVE VICE PRESIDENT | € | 0. | 0. | 0 | 0 | 0 | 0 | 0 |
| (2) CHRIS W. COX | 8 | 1,057,58 | 200,000. | 27,732. | 35,484. | 71,866. | 1,392,668. | 0 |
| EXECUTIVE DIRECTOR, NRAILA | 1 | | 0. | 0. | 0 | 0 | 0 | 0 |
| (3) WILSON H, PHILLIPS | 8 | 573,567. | 210,000. | 116,970. | 20,280. | 27,952. | 948,769. | 0 |
| TREASURER (ENDING 9/13/2018) | 8 | | 0. | .0 | 0. | | 0 | 0 |
| (4) JOSHUA L. POWELL | € | 782,739. | 0. | 61,398. | 16,500. | 59,332. | 919,969. | 0. |
| CHIEF OF STAFF AND EXEC, DIR | € | 0. | 0. | .0 | 0. | 0. | 0 | 0 |
| (5) CRAIG B. SPRAY | Ξ | 401,111. | 0. | 195,847. | 16,500. | 34,757. | 648,215. | 0 |
| TREASURER (FROM 9/13/2018) | € | 0. | 0. | 0. | 0. | 0. | 0 | 0 |
| (6) JOHN C. FRAZER | € | 325,953. | 54,100. | 33,023. | 16,500. | 60,077. | 489,653. | 0 |
| SECRETARY AND GENERAL COUNSEL | € | 0. | 0. | .0 | 0 | 0. | 0 | 0 |
| (7) JOSEPH P. DEBERGALIS, JR. | 8 | 347,452. | 0. | 55,774. | 16,500. | 41,302. | 461,028. | 0 |
| EXEC DIR, GENERAL OPS (STARTING 12/3 | _ | 0. | 0. | | 0. | 0. | 0. | 0 |
| (8) TYLER SCHROPP | € | 604,803. | 122,206. | 6,136. | 16,500. | 57,123. | 806,768. | 0 |
| MANAGING DIRECTOR, ADVANCEMENT | € | 0. | 0. | 0. | 0. | 0. | 0 • | 0 |
| (9) TODD GRABLE | ε | 438,703. | 217,553. | 11,130. | 16,500. | 49,654. | 733,540. | 0 |
| EXECUTIVE DIRECTOR, MEMBERSHIP | € | | | | | 0. | | 0. |
| (10) DOUGLAS HAMLIN | € | 443,585. | 80,000. | 57,736. | 16,443. | 57,966. | 655,730. | 0. |
| EXECUTIVE DIRECTOR, PUBLICATIONS | 8 | 0 | 0. | 0 | 0. | 0. | • 0 | 0. |
| (11) DAVID LEHMAN | ε | 450,057. | 50,000. | 71,675. | 16,500. | 14,621. | 602,853. | .0 |
| IRECTOR, NRAILA | | - 1 | 0 | | 0. | 0. | 0. | .0 |
| (12) ERIC FROHARDT | € | 500,000. | 0 | 25,745. | 15,000. | 4,863. | 545,608. | .0 |
| DIRECTOR, EDUCATION AND TRAINING | (| 0 | 0 | 0. | 0. | 0. | 0. | 0 |
| (13) ROBERT K. WEAVER | € | 0 | 0. | 720,000. | .0 | 0. | 720,000. | 0 |
| FMR EXE. DIR, GENERAL OPERATIONS | | 0 | 0 | 0. | 0. | 0. | 0 | 0 |
| SLLIN | Ξ | 0 | 0 | 535,045. | 0. | 0. | 535,045. | 0 |
| ANAGING DIR, AFFINITY AND LICEN | 3 | | 0 | 0. | • 0 | 0. | 0 | 0. |
| ER L. NORTH | Ξ | 1,377,617. | 0 | 0. | 0. | 0. | 1,377,617. | 0 |
| | 9 | - 1 | 0. | 0. | 0 | 0. | 0. | 0. |
| ION P. HAMMER | Ξ | 270,000. | 0. | 0. | 0. | 0. | 270,000. | 0. |
| DIRECTOR | ▣ | 0 | 0. | 0 | 0. | 0. | 0. | 0. |
| | | | | | | | | |

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 1A:

TRAVEL WAS USED ON OCCASIONS WHEN TRAVEL LOGISTICS OR SECURITY CHARTER

COMPANIONS OCCASIONALLY TRAVEL CONCERNS PRECLUDED OTHER AVAILABLE OPTIONS.

IN CONNECTION WITH VIA PRIVATE AIRCRAFT WITH NRA OFFICIALS AND VENDORS

CERTAIN COMPENSATION ELEMENTS WERE THEIR PROFESSIONAL RESPONSIBILITIES.

FOR ONE INDIVIDUAL FOR ONE TIME RELOCATION COSTS AND THE TAX GROSSED UP

GROSS UP WAS PROPERLY INCLUDED IN TAXABLE COMPENSATION . HOUSING EXPENSES

TAXABLE Z INDIVIDUALS AND WERE PROPERLY INCLUDED WERE PROVIDED FOR FIVE

CLUBS USED FOR BUSINESS PURPOSES WERE PROPERLY COMPENSATION. DUES FOR

EXCLUDED FROM TAXABLE COMPENSATION.

PART I, LINE 3:

THE NRA'S TOP MANAGEMENT OFFICIALS IS ESTABLISHED BY COMPENSATION OF

METHODS INCLUDING INDEPENDENT COMPENSATION CONSULTANTS, COMPENSATION

AND COMPARABILITY DATA. IN ADDITION, UNDER THE NRA SURVEYS AND STUDIES,

BYLAWS COMPENSATION OF CERTAIN ELECTED OFFICERS (INCLUDING THE EXECUTIVE

BASED ON VICE PRESIDENT) MUST BE APPROVED BY THE BOARD OF DIRECTORS,

THE COMPENSATION COMMITTEE. ALL DECISIONS ARE PROPERLY ΒY RECOMMENDATIONS

Schedule J (Form 990) 2018

DOCUMENTED.

Part III | Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINES 4A-B:

ROBERT K. WEAVER'S EMPLOYMENT AS EXECUTIVE DIRECTOR OF GENERAL OPERATIONS

IN 2016 AND DURING CALENDAR YEAR 2018 MR. WEAVER RECEIVED TAXABLE ENDED

COMPENSATION OF \$720,000.

AFFINITY AND MICHEL MARCELLIN'S EMPLOYMENT AS MANAGING DIRECTOR OF LICENSING ENDED IN 2016 AND DURING CALENDAR YEAR 2018 MR. MARCELLIN

RECEIVED TAXABLE COMPENSATION OF \$535,045.

CERTAIN THE NRA HAS DEFERRED COMPENSATION RETIREMENT BENEFIT PLANS FOR EMPLOYEES AND NONQUALIFIED SUPPLEMENTAL EXECUTIVE RETIREMENT PLANS FOR

CERTAIN EMPLOYEES. FOR NONQUALIFIED PLANS, THE FILING ORGANIZATION DECIDES

THE BENEFIT AMOUNT AND TIMEFRAME FOR VESTING OF EACH PARTICIPANT USING

DIFFERENT FACTORS PARTICULAR TO EACH RELEVANT INDIVIDUAL AND HIS OR HER

SPECIFIC CIRCUMSTANCES. PAYOUTS ARE PROPERLY INCLUDED IN TAXABLE WAGES AND

REPORTED IN W-2 INCOME.

PART II

53-0116130

| Part III | Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

COLUMN B(I) MR. NORTH RECEIVED \$1,377,617 PAID BY AN UNRELATED

ORGANIZATION, ACKERMAN MCQUEEN (AS FURTHER DETAILED ON SCHEDULE 0).

COMPENSATION WITHIN TAXABLE WAGES FOR OTHER REPORTABLE B(III) COLUMN

\$38,862 GROUP LIFE 457(F) PAYOUT. INCLUDED \$365,909 MR. LAPIERRE TAXABLE PERSONAL EXPENSES. 457(B) PLAN, AND \$4,485 \$18,500 INSURANCE,

OTHER REPORTABLE COMPENSATION WITHIN TAXABLE WAGES FOR MR. COX INCLUDED

TAXABLE \$1,402 \$7,830 GROUP LIFE INSURANCE, AND PLAN, \$18,500 457(B)

OTHER REPORTABLE COMPENSATION WITHIN TAXABLE WAGES PERSONAL EXPENSES.

\$21,012 GROUP LIFE FOR MR. PHILLIPS INCLUDED \$73,978 457(F) PAYOUT,

\$18,500 457(B) PLAN, AND \$3,480 TAXABLE PERSONAL EXPENSES INSURANCE,

OTHER REPORTABLE COMPENSATION WITHIN TAXABLE WAGES FOR MR. POWELL

INCLUDED \$57,168 TAXABLE PERSONAL EXPENSES AND \$4,230 GROUP LIFE

INSURANCE. OTHER REPORTABLE COMPENSATION WITHIN TAXABLE WAGES FOR MR.

SPRAY INCLUDED \$175,174 ONE-TIME RELOCATION COSTS AND TEMPORARY LIVING

\$18,500 457(B) PLAN, AND \$2,173 GROUP LIFE INSURANCE. OTHER EXPENSES,

\$18,500 457(B) PLAN,

\$10,681 TAXABLE PERSONAL EXPENSES, AND \$3,842

REPORTABLE COMPENSATION WITHIN TAXABLE WAGES FOR MR. FRAZER INCLUDED

LIFE INSURANCE. OTHER REPORTABLE COMPENSATION WITHIN TAXABLE GROUP

Schedule J (Form 990) 2018

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

| WAGES FOR MR. DEBERGALIS INCLUDED \$35,342 TAXABLE PERSONAL EXPENSES, |
|---|
| \$18,500 457(B) PLAN, AND \$1,932 GROUP LIFE INSURANCE. OTHER REPORTABLE |
| COMPENSATION WITHIN TAXABLE WAGES FOR MR. SCHROPP INCLUDED \$1,530 GROUP |
| LIFE INSURANCE AND \$2,842 TAXABLE PERSONAL EXPENSES. OTHER REPORTABLE |
| COMPENSATION WITHIN TAXABLE WAGES FOR MR. GRABLE INCLUDED \$9,600 |
| TAXABLE PERSONAL EXPENSES AND \$1,530 GROUP LIFE INSURANCE. OTHER |
| REPORTABLE COMPENSATION WITHIN TAXABLE WAGES FOR MR. HAMLIN INCLUDED |
| \$24,505 TAXABLE PERSONAL EXPENSES, \$18,500 457(B) PLAN, AND \$14,731 |
| GROUP LIFE INSURANCE. OTHER REPORTABLE COMPENSATION WITHIN TAXABLE |
| WAGES FOR MR. LEHMAN INCLUDED \$50,691 457(F) PAYOUT, \$18,500 457(B) |
| PLAN, AND \$2,484 GROUP LIFE INSURANCE. OTHER REPORTABLE COMPENSATION |
| WITHIN TAXABLE WAGES FOR MR. FROHARDT INCLUDED \$24,605 TAXABLE PERSONAL |
| EXPENSES AND \$1,140 GROUP LIFE INSURANCE. |
| COLUMN C EMPLOYER DEPOSITS TOWARD BENEFITS THAT WILL NOT BE PAID UNTIL |
| A FUTURE DATE ARE SHOWN IN COLUMN C. THE AMOUNT FOR MR. LAPIERRE |
| INCLUDED \$16,500 401(K) AND \$3,780 PENSION PLAN. THE AMOUNT FOR MR. COX |
| INCLUDED \$16,500 401(K), \$15,204 457(F), AND \$3,780 PENSION PLAN. THE |
| AMOUNT FOR MR. PHILLIPS INCLUDED \$16,500 401(K) AND \$3,780 PENSION |
| PLAN. THE AMOUNT FOR MR. POWELL INCLUDED \$16,500 401(K). THE AMOUNT FOR |

Schedule J (Form 990) 2018

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

\$16,443 401(K). THE AMOUNT FOR MR. LEHMAN INCLUDED \$16,500 401(K). THE STANDARD NONTAXABLE COLUMN D NONTAXABLE BENEFITS ARE PROVIDED TO EMPLOYEES CONSISTENT WITH \$16,500 401(K). THE AMOUNT FOR MR. DEBERGALIS INCLUDED \$16,500 401(K). THE AMOUNT FOR MR. SCHROPP INCLUDED \$16,500 401(K). THE AMOUNT FOR MR. MR. SPRAY INCLUDED \$16,500 401(K). THE AMOUNT FOR MR. FRAZER INCLUDED BENEFITS INCLUDE EMPLOYEE BENEFITS SUCH AS THE EMPLOYER PAID PORTIONS OF MEDICAL AND DENTAL PLANS AND LONG-TERM AND SHORT-TERM DISABILITY GRABLE INCLUDED \$16,500 401(K). THE AMOUNT FOR MR. HAMLIN INCLUDED ASSOCIATION INDUSTRY STANDARDS AND BEST PRACTICES. AMOUNT FOR MR. FROHARDT INCLUDED \$15,000 401(K).

PLANS

SCHEDULE L

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open To Public

Name of the organization

Inspection **Employer identification number**

| | N | ATION | AL_ | RIFLE AS | SOC | IAT | ION | OF AME | RIC | CA | 53 | -01 | .161 | 30 | | |
|--------------------|--------------|----------------|---------|---------------------------------|--------|--------------------|------------|-----------------|-------|---------------------|----------|----------|--------|------------------|-------|--------|
| | | | | | | | | | | (29) organization | | | | | | |
| Comple | ete if the c | organization | ansv | vered "Yes" on | Form 9 | 990, Pa | art IV, Ii | ne 25a or 25b | o, or | Form 990-EZ, Pa | art V, I | ine 40 | b. | | | |
| 1 (a) Name of disc | n baifileur | ereon | (b) F | Relationship bet | | | lified | | -\ D | econimition of the | | _ | | (d) | Corre | cted? |
| (a) Name of dist | | erson | | person and o | rganiz | ation | | | C) D | escription of tran | ISACTIO | n | | | es | No |
| | | | | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | | | | |
| 2 Enter the amou | nt of tax i | ncurred by | the o | rganization man | agers | or disc | ualified | d persons dur | ing 1 | the year under | | | | | | |
| section 4958 | | | | | | | | | | | | ▶ \$ | | | | |
| 3 Enter the amou | nt of tax, i | if any, on lir | ne 2, a | above, reimburs | ed by | the org | ganizati | on | | | | | | | | |
| David III Lassa | | 7 | | 1.75 | | | | | | | | | | | | |
| | | | | erested Pers | | _ | | | | | | | | | | |
| Comple | ete if the o | rganization | ansv | vered "Yes" on I | Form 9 | 990-EZ, | , Part V | , line 38a or F | orn | n 990, Part IV, lin | e 26; d | or if th | e orga | nizatio | n | |
| | | | | Part X, line 5, 6 | | | | | | | | | | | | |
| (a) Name of | | (b) Relation | | (c) Purpose | | oan to or m the | |) Original | (1 | f) Balance due | | In | (h) Ap | proved and or | (i) W | ritten |
| interested per | son | with organiz | zation | of loan | | ization? | princi | ipal amount | | | defa | ult? | comm | nittee? | agree | ment? |
| | | | | | То | From | | | | | Yes | No | Yes | No | Yes | No |
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| | | | answ | vered "Yes" on F | orm 9 | 90, Pa | rt IV, lir | ne 27. | | | | | | | | |
| (a) Name of int | erested p | erson | (| b) Relationship | | | |) Amount of | | (d) Type | | | | Purp | | |
| | | | 1 | interested pers the organiza | | q | | assistance | | assistan | ce | | 8 | assista | ınce | |
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| Part IV | Business | Transactions | Involving | Interester | Persons. |
|---------|----------|--------------|-----------|------------|----------|

| | Complete if the organization answered | "Yes" on Form 990, Part IV, line 28a, 28 | b, or 28c. | | | |
|------|---------------------------------------|---|---------------------------|--------------------------------|---------|-------------------------------|
| | (a) Name of interested person | (b) Relationship between interested person and the organization | (c) Amount of transaction | (d) Description of transaction | organiz | aring of zation's nues? |
| TOM | SELLECK | SEE PART V | 176 000 | SEE PART V | Yes | No |
| | POWELL ADVER.PHOTOGRAP | | | SEE PART V | | X |
| | | | | | | |
| | | | | | | |
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| | | | | | | |
| Part | | nses to questions on Schedule L (see in | nstructions). | | | |
| SCH | L, PART IV, BUSINESS TI | Ub. | | D DEDCOMC. | | |
| | | | | D PERSONS: | | |
| (A) | NAME OF PERSON: JIM POT | WELL ADVER.PHOTOGRAP | HY | | | |
| | | | | | | |
| SCH | L, PART IV, BUSINESS TI | RANSACTIONS INVOLVING | G INTERESTE | D PERSONS: | | |
| (A) | NAME OF PERSON: TOM SEI | LLECK | | | | |
| (B) | RELATIONSHIP BETWEEN II | NTERESTED PERSON AND | ORGANIZATI | ON: | | |
| BOAL | RD MEMBER | | | | | |
| (D) | DESCRIPTION OF TRANSACT | FION: THE NRA PURCHA | SED A GROUP | OF | | |
| COLI | ECTIBLE FIREARMS THAT (| ORIGINATED FROM THE | COLLECTION | OF THEN-BOA | RD | |
| MEME | BER TOM SELLECK FOR \$476 | 5,000. THE NRA INTEN | DS TO RESEL | L THE FIREA | RMS | |
| | THERWISE USE THEM IN N | | | | | |
| | N,A LICENSED FIREARMS I | | | | | |
| | NRA ON GUN COLLECTOR OU | | | | | |
| 4444 | Mid ON GON COUNTRY OF | JINDACH, ADDIOIED IN | IIII IIANDAC | IION: | | |
| (A) | NAME OF PERSON: JIM POV | WELL ADVERTISING PHO | TOGRAPHV | | | |
| | | | | | | |
| (B) | RELATIONSHIP BETWEEN IN | NTERESTED PERSON AND | ORGANIZATI | ON: | | |
| OWNE | R IS AN OFFICER'S RELAT | PIVE | | | | |
| (D) | DESCRIPTION OF TRANSACT | TION: THE NRA PURCHA | SED JIM POW | ELL | | |
| ADVE | RTISING PHOTOGRAPY SERV | ICES FOR NRA COMPET | ITIONS EVEN | TS. THE OWN | ER | |
| OF I | HE PHOTOGRAPHY SERVICES | COMPANY, JIM POWEL | L, IS THE F | ATHER OF NR | A | |
| | | | So | hedule L (Form 990 c | r 990-E | Z) 2018 |

| Schedule L | Form 990 c | or 990-EZ) | <u>r</u> | NATIONAL | · KILPE | ASSOCIATION | OF. | AMERICA | 53-0116130 | Page 2 |
|------------|------------|--------------|----------|------------------|--------------|------------------------|--------|---------------------|------------|--------|
| Part V | | | | | | | | | | |
| | Complete | this part to | o provid | e additional inf | ormation for | responses to questions | on Sch | nedule L (see insti | ructions). | |
| OPPTOP1 | ם דריפוו | . DOME | T T | | | | | | | |
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SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Part I

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization

Types of Property

NATIONAL RIFLE ASSOCIATION OF AMERICA

Employer identification number 53-0116130

| | | (a) Check if applicable | (b) Number of contributions or | (c) Noncash contribution amounts reported on | (d) Method of detern noncash contribution | | ts |
|-----|---|-------------------------------|--------------------------------------|--|--|-----|-----|
| | 4 | | items contributed | Form 990, Part VIII, line 1g | | | |
| 1 | Art - Works of art | | | | | | |
| 2 | Art - Historical treasures | | | | | | |
| 3 | Art - Fractional interests | | | | | | |
| 4 | Books and publications | | | | | | |
| 5 | Clothing and household goods | | | | | | |
| 6 | Cars and other vehicles | | | | | | |
| 7 | Boats and planes | | | | | | |
| 8 | Intellectual property | 37 | 11 600 | 407 250 | | | |
| 9 | Securities - Publicly traded | Х | 11,600 | 407,352. | F'MV | | |
| 10 | Securities - Closely held stock | | | | | | |
| 11 | Securities - Partnership, LLC, or | | | | | | |
| | trust interests | | | | | | |
| 12 | Securities - Miscellaneous | | | | | | |
| 13 | Qualified conservation contribution - Historic structures | | | | | | |
| 14 | Qualified conservation contribution - Other | | | | | | |
| 15 | Real estate - Residential | | | | | | |
| 16 | Real estate - Commercial | | | | | | |
| 17 | Real estate - Other | | | | | | |
| 18 | Collectibles | | | | | | |
| 19 | Food inventory | | | | | | |
| 20 | Drugs and medical supplies | | | | | | |
| 21 | Taxidermy | | | | | | |
| 22 | Historical artifacts | | | | | | |
| 23 | Scientific specimens | | | | | | |
| 24 | Archeological artifacts | | | | | | |
| 25 | Other () | | | | | | |
| 26 | Other | | | | | | |
| 27 | Other () | | | | | | |
| 28 | Other () | | | | | | |
| 29 | Number of Forms 8283 received by the organiz | ation during | the tax year for co | ontributions | | | |
| | for which the organization completed Form 828 | 33, Part IV, D | Donee Acknowledg | ement 29 | | | |
| | | | | | | Yes | No |
| 30a | During the year, did the organization receive by | contributio | n any property rep | orted in Part I, lines 1 throug | n 28, that it | | Yes |
| | must hold for at least three years from the date | of the initia | l contribution, and | which isn't required to be us | ed for | | 20 |
| | exempt purposes for the entire holding period? | | | ••••• | 30 | a | X |
| b | If "Yes," describe the arrangement in Part II. | | | | | | |
| 31 | Does the organization have a gift acceptance p | olicy that re | quires the review o | of any nonstandard contributi | ons?31 | X | |
| 32a | Does the organization hire or use third parties of | or related or | ganizations to solic | cit, process, or sell noncash | | | |
| | contributions? | | | | 32 | a X | |
| b | If "Yes," describe in Part II. | | | | | | |
| 33 | If the organization didn't report an amount in co | olumn (c) for | a type of property | for which column (a) is chec | ked, | 100 | 111 |
| | describe in Part II. | | | | | | |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

| Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. |
|---|
| SCHEDULE M, LINE 32B: |
| ON OCCASION AND AS APPROPRIATE, SECURITIES AND OTHER DONATED LIQUID OR |
| ILLIQUID ASSETS CAN BE CONVERTED INTO CASH BY THE OUTSIDE THIRD PARTY |
| SPECIALISTS THAT PARTNER WITH THE NRA TO FULFILL THE PHILANTHROPIC |
| INTENTIONS OF THE DONORS. |
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

2018
Open to Public Inspection

Name of the organization

NATIONAL RIFLE ASSOCIATION OF AMERICA

Employer identification number 53-0116130

FORM 990, PART I, SECTION 1, LINE 1

THE NRA IS A 501(C)(4) MEMBERSHIP ASSOCIATION WITH FOUR 501(C)(3)

PUBLIC CHARITIES AND A SECTION 527 POLITICAL ACTION COMMITTEE (PAC)

WHICH IS A SEPARATE SEGREGATED FUND. THE FOUR CHARITIES AFFILIATED WITH

THE NRA ARE NRA CIVIL RIGHTS DEFENSE FUND, NRA FOUNDATION INC, NRA

FREEDOM ACTION FOUNDATION, AND NRA SPECIAL CONTRIBUTION FUND DBA NRA

WHITTINGTON CENTER. THE POLITICAL ACTION COMMITTEE IS NRA POLITICAL

VICTORY FUND. SEE SCHEDULE R, PART II.

THIS INFORMATIONAL NOTE REGARDS THE NRA'S UNRELATED BUSINESS INCOME.

FORM 990 PAGE 1 SHOWS GROSS UNRELATED BUSINESS REVENUE ON LINE 7A AND

NET UNRELATED BUSINESS TAXABLE INCOME ON LINE 7B. THE NRA DID NOT OWE

UNRELATED BUSINESS INCOME TAX FOR THE YEAR 2018 BECAUSE DIRECTLY

CONNECTED DEDUCTIONS WERE GREATER THAN THE ASSOCIATED INCOME IN 2018.

THE MAIN SOURCES OF NRA UNRELATED BUSINESS INCOME, AS SHOWN ON 990 PART

VIII, COLUMN C, ARE CERTAIN MERCHANDISE SALES FROM THE E-COMMERCE

PLATFORMS, ADVERTISING, AND OTHER ACTIVITIES NOT RELATED TO THE NRA'S

TAX EXEMPT PURPOSES. ADDITIONAL INFORMATIONAL NOTES RELATED TO THE

NRA'S TAXES ARE SHARED ON SCHEDULE C REGARDING 527(F) PROXY TAXES AND

SCHEDULE D REGARDING STATE AND LOCAL TAXES. THE NRA CHOOSES TO SHARE

THIS EXTRA INFORMATION ABOUT THE TAXES IN ORDER TO DEMONSTRATE IN GOOD

FAITH THAT THE ORGANIZATION IS A TAXPAYER IN GOOD STANDING.

THIS INFORMATIONAL NOTE REGARDS THE NRA'S CONTRIBUTION REVENUE. THE

VAST MAJORITY OF CONTRIBUTIONS TO THE NRA COMES FROM MILLIONS OF SMALL

INDIVIDUAL DONORS. GIFTS FROM COMPANIES AND EXECUTIVES IN THE FIREARMS,

HUNTING, AND SHOOTING SPORTS INDUSTRIES INDUSTRIES TYPICALLY COMPRISE

LESS THAN 5% OF THE NRA'S CONTRIBUTION REVENUE EVERY YEAR, AS APPLIED

TO CONTRIBUTION REVENUE REPORTED ON FORM 990, PART VIII, LINE 1.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

THIS NOTE PROVIDES FURTHER INFORMATION ON PART III PROGRAM SERVICE

ACCOMPLISHMENTS. NRA PROGRAM SERVICES ARE CENTERED ON THE NRA'S CORE

MISSION OF FIREARMS SAFETY, EDUCATION, AND TRAINING, INCLUDING

MESSAGING THAT PROMOTES FREEDOM AND LIBERTY. THE ADDITIONAL PROGRAM

SERVICE EXPENSES OF \$59,426,544 NOTED ON 990 CORE FORM PART III LINE 4D

INCLUDE THE PROGRAM SERVICES COMPONENTS OF PUBLIC AFFAIRS, EXECUTIVE,

AND ADVANCEMENT OPERATIONS. 990 READERS ARE ENCOURAGED TO ACCESS

NRA.ORG FOR OPPORTUNITIES TO CONTINUE TO ENGAGE WITH THE NRA.

EXPENSES \$ 59,426,544. INCLUDING GRANTS OF \$ 0. REVENUE \$ 1,330,515.

FORM 990, PART VI, SECTION A, LINE 2:

SEVERAL NRA DIRECTORS ARE EMPLOYED IN THE FIREARMS INDUSTRY AS

MANUFACTURERS OR SELLERS OF FIREARMS, AMMUNITION, OR COMPONENTS THEREOF.

THESE BOARD MEMBERS ROUTINELY BUY AND SELL PRODUCTS FROM ONE ANOTHER IN THE

ORDINARY COURSE OF BUSINESS.

FORM 990, PART VI, SECTION A, LINE 6:

THE NATIONAL RIFLE ASSOCIATION IS A MEMBERSHIP ASSOCIATION THAT REPRESENTS
ONLY INDIVIDUAL CITIZENS. MEMBERSHIP DUES ARE PROPERLY REPORTED ON FORM

990, PART VIII, LINE 2 PURSUANT TO THE INSTRUCTIONS FOR SUCH REPORTING.

FORM 990, PART VI, SECTION A, LINE 7A:

NRA MEMBERS ELECT ALL 76 MEMBERS OF THE NRA BOARD OF DIRECTORS. 75 DIRECTORS ARE ELECTED FOR STAGGERED THREE YEAR TERMS, AND THE 76TH DIRECTOR IS ELECTED FOR ONE YEAR TERM ON THE OCCASION OF EACH ANNUAL MEETING OF MEMBERS.

FORM 990, PART VI, SECTION A, LINE 7B:

CERTAIN BOARD OF DIRECTORS DECISIONS ARE SUBJECT TO MEMBERSHIP APPROVAL PER NRA BYLAWS AND NEW YORK NOT FOR PROFIT CORPORATE LAW.

FORM 990, PART VI, SECTION B, LINE 11B:

FORM 990 IS REVIEWED BY THE EXTERNAL AUDITING FIRM, PRESENTED TO THE NRA BOARD OF DIRECTORS AUDIT COMMITTEE, AND MADE AVAILABLE TO THE FULL NRA BOARD OF DIRECTORS, BEFORE IT IS FILED WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

THE ORGANIZATION'S CONFLICT OF INTEREST POLICY APPLIES TO OFFICERS, DIRECTORS, AND KEY EMPLOYEES OF THE FILING ORGANIZATION AND ITS AFFILIATES, AS WELL AS TO THEIR RELATIVES. RELATED PARTY TRANSACTIONS AND POTENTIAL CONFLICTS ARE SELF-REPORTED ON A QUESTIONNAIRE THAT IS DISTRIBUTED AT LEAST ANNUALLY AND REVIEWED BY THE SECRETARY AND GENERAL COUNSEL. ISSUES MAY ALSO BE REPORTED THROUGH OTHER MEANS OR INDEPENDENTLY DISCOVERED BY STAFF. REGARDLESS OF HOW THEY ARE REPORTED, RELATED PARTY TRANSACTIONS AND ISSUES OF APPARENT CONFLICT ARE PRESENTED TO THE BODY DESIGNATED BY THE BOARD OF DIRECTORS (THE AUDIT COMMITTEE) FOR APPROVAL, DISAPPROVAL, OR PRECAUTIONARY MEASURES AS NEEDED.

Employer identification number 53-0116130

FORM 990, PART VI, SECTION B, LINE 15:

COMPENSATION OF THE NRA'S TOP MANAGEMENT OFFICIALS IS ESTABLISHED BY

METHODS INCLUDING INDEPENDENT COMPENSATION CONSULTANTS, COMPENSATION

SURVEYS AND STUDIES, AND COMPARABILITY DATA. IN ADDITION, UNDER THE NRA

BYLAWS COMPENSATION OF CERTAIN ELECTED OFFICERS (INCLUDING THE EXECUTIVE

VICE PRESIDENT) MUST BE APPROVED BY THE BOARD OF DIRECTORS, BASED ON

RECOMMENDATIONS BY THE COMPENSATION COMMITTEE. ALL DECISIONS ARE PROPERLY

DOCUMENTED.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AZ, AR, CA, CO, CT, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NE

NV, NH, NJ, MT, NM, NY, ND, NC, OH, OK, OR, PA, PR, RI, SC, DE, SD, TN, TX, UT, VT, VA, WV, WA, WI,

WY

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION'S CONFLICT OF INTEREST POLICY APPLIES TO OFFICERS,

DIRECTORS, AND KEY EMPLOYEES OF THE FILING ORGANIZATION AND ITS AFFILIATES,

AS WELL AS TO THEIR RELATIVES. RELATED PARTY TRANSACTIONS AND POTENTIAL

CONFLICTS ARE SELF-REPORTED ON A QUESTIONNAIRE THAT IS DISTRIBUTED AT LEAST

ANNUALLY AND REVIEWED BY THE SECRETARY AND GENERAL COUNSEL. ISSUES MAY ALSO

BE REPORTED THROUGH OTHER MEANS OR INDEPENDENTLY DISCOVERED BY STAFF.

REGARDLESS OF HOW THEY ARE REPORTED, RELATED PARTY TRANSACTIONS AND ISSUES

OF APPARENT CONFLICT ARE PRESENTED TO THE BODY DESIGNATED BY THE BOARD OF

DIRECTORS (THE AUDIT COMMITTEE) FOR APPROVAL, DISAPPROVAL, OR PRECAUTIONARY

MEASURES AS NEEDED.

Employer identification number 53-0116130

READERS ARE POLITELY REMINDED THE NRA WAS FOUNDED 147 YEARS AGO, IN

1871. THE NRA'S 1944 DETERMINATION LETTER FROM THE INTERNAL REVENUE

SERVICE IS AVAILABLE ON GUIDESTAR.ORG AND CAN ALSO BE REQUESTED

DIRECTLY FROM THE NRA AS REQUIRED BY LAW. FORMS 990 CAN BE REQUESTED

DIRECTLY FROM THE NRA AS REQUIRED BY LAW.

FORM 990, PART VII, SECTION A, LINE 1

THIS INFORMATIONAL NOTE REGARDS SERVICE ON THE NRA BOARD OF DIRECTORS,
WHICH IS NOT COMPENSATED. BOARD MEMBERS WHO RECEIVED COMPENSATION IN

2018 WERE COMPENSATED FOR OTHER REASONS, NOT FOR THEIR VOLUNTARY BOARD

SERVICE. MR. BUTZ, MS. FROMAN, MS. GOLOB, MS. HAMMER, MR. KEENE, MR.

NUGENT, MR. OLSON, AND MR. SKELTON WERE COMPENSATED FOR OTHER

PROFESSIONAL SERVICES THEY PERFORMED FOR THE ORGANIZATION. MR.

BROWNELL, MS. LIGHTFOOT, AND MR. MILLS, AND MR. TED NUGENT RECEIVED

MEMBERSHIP RECRUITING COMMISSIONS THAT WERE PAID TO THEIR COMPANIES.

FOR THE PURPOSE OF DETERMINING THE COUNT OF INDEPENDENT DIRECTORS AS OF

DECEMBER 31, 2018 SHOWN ON PART I LINE 3 AND PART VI LINE 1B, THE NINE

DIRECTORS NOT CONSIDERED INDEPENDENT FOR 2018 WERE MR. BUTZ, MS.

FROMAN, MS. GOLOB, MS. HAMMER, MR. KEENE, MR. NORTH, MR. NUGENT, MR.

OLSON, AND MR. SKELTON.

FORM 990, PART VII, SECTION A, LINE 5

IN 2018, MR. NORTH RECEIVED NO COMPENSATION FROM THE NRA FOR HIS 20

HOURS PER WEEK AS NRA PRESIDENT. THE PAYMENTS OF \$1,377,617 WERE FROM

AN UNRELATED ORGANIZATION, ACKERMAN MCQUEEN INC. CERTAIN OF THESE

PAYMENTS ARE DISPUTED AND SUBJECT TO ONGOING LITIGATION. IN 2018. MS.

GOLOB WAS ALSO COMPENSATED BY AN UNRELATED ORGANIZATION, ACKERMAN

Name of the organization

NATIONAL RIFLE ASSOCIATION OF AMERICA

Employer identification number 53-0116130

MCQUEEN INC, \$28,661 FOR PROFESSIONAL SERVICES PERFORMED ON NRA DIGITAL MEDIA PROJECTS.

FORM 990, PART VII SECTION B, LINE 1

THIS INFORMATIONAL NOTE PROVIDES ADDITIONAL DETAIL ABOUT AMOUNTS PAID

TO OUTSIDE SERVICES PROVIDERS. THE FILING ORGANIZATION REPORTS

COMPENSATION PAID TO SERVICES PROVIDERS EXCLUSIVE OF ADVERTISING AND

OTHER MEDIA PLACED ON BEHALF OF THE FILING ORGANIZATION AND EXPENSES

INCURRED ON BEHALF OF THE FILING ORGANIZATION. FOR EXAMPLE, THE FIGURE

OF \$31,994,168 STATED ON PART VII SECTION B LINE 1 REFLECTS

COMPENSATION FOR SERVICES PAID TO ACKERMAN MCQUEEN INC. IT EXCLUDES

\$6,337,508 INCURRED FOR OUT OF POCKET EXPENDITURES ON BEHALF OF THE

FILING ORGANIZATION INCLUDING MEDIA, OUTSIDE VENDOR COSTS, AND

REIMBURSEMENT OF TRAVEL AND BUSINESS EXPENSES.

FORM 990, PART VIII, LINE 2B

THIS INFORMATIONAL NOTE REGARDS THE REPORTING OF MEMBER DUES ON FORM

990. LINE 1B OF THE REVENUE STATEMENT IS PROPERLY LEFT BLANK. PURSUANT

TO 990 INSTRUCTIONS, MEMBERSHIP DUES THAT ARE NOT CONTRIBUTIONS BECAUSE

THEY COMPARE REASONABLY WITH AVAILABLE BENEFITS ARE SHOWN ON LINE 2.

THUS, ALL NRA MEMBER DUES ARE PROPERLY SHOWN ON THE 990 REVENUE

STATEMENT AS PROGRAM SERVICE REVENUE ON LINE 2, OTHER THAN NRA

LIFE-PLUS CONTRIBUTIONS WHICH ARE PROPERLY COUNTED AS CONTRIBUTION

REVENUE IN LINE 1F OF THE 990 REVENUE STATEMENT.

THIS INFORMATIONAL NOTE REGARDS THE NRA'S PAYMENT OF FEES FOR OUTSIDE PROFESSIONAL SERVICES AS STATED ON LINE 11 OF THE 990 EXPENSE STATEMENT. LINE 11B REPORTS LEGAL FEES PAID TO OUTSIDE ATTORNEYS, SUCH AS FOR SECOND AMENDMENT CASE WORK AND RELATED LITIGATION AT THE FEDERAL AND STATE LEVELS AND FOR REGULATORY AND COMPLIANCE MATTERS. LINE 11C REPORTS ACCOUNTING FEES PAID TO THE OUTSIDE CPA FIRM THAT PROVIDES THE NRA'S AUDITING AND TAX SERVICES. LINE 11D REPORTS LOBBYING EXPENSE PAID TO EXTERNAL REGISTERED LOBBYISTS. LINE 11E REPORTS FUNDRAISING COSTS PAID TO THE AUTHORIZED VENDORS LISTED ON SCHEDULE G. LINE 11F REPORTS INVESTMENT MANAGEMENT FEES PAID TO INVESTMENT ADVISORS THAT MANAGE THE NRA'S PORTFOLIOS. LINE 11G SHOWS TELEMARKETING COSTS FOR MEMBERSHIP SERVICING. PROFESSIONAL SERVICES PERFORMED BY NRA EMPLOYEES (IN HOUSE COUNSEL, IN HOUSE ACCOUNTANTS, IN HOUSE LOBBYISTS, IN HOUSE FUNDRAISERS, AND IN HOUSE INVESTMENT MANAGERS, RESPECTIVELY) ARE PROPERLY REPORTED WITHIN LINES 5-7 OF THE 990 EXPENSE STATEMENT, AS REQUIRED BY 990 FORM INSTRUCTIONS. PROFESSIONAL SERVICES PERFORMED BY THE TELEMARKETING VENDOR FOR FUNDRAISING PURPOSES, RATHER THAN FOR MEMBERSHIP, ARE PROPERLY REPORTED WITHIN LINE 11E, AS REQUIRED BY 990 FORM INSTRUCTIONS.

FORM 990, PART IX, LINE 24E

THIS RESPONSE EXPLAINS \$12,581,928 OF OTHER EXPENSES STATED ON LINE 24E OF THE 990, PART IX EXPENSE STATEMENT WHICH WERE NOT ACCOMMODATED BY OTHER EXPENSE LINE DESCRIPTIONS. THIS FIGURE INCLUDES \$9,204,256 OF FULFILLMENT MATERIALS, \$5,747,802 BANKING FEES, \$1,276,567 MEMBERSHIP PREMIUMS, \$560,407 OF NON-PAYROLL TAXES, AND (\$4,927,105) FASB ASC 715 PENSION ACCOUNTING VALUATION ADJUSTMENT.

SCHEDULE R (Form 990) Name of the organization

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

► Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection 2018

OMB No. 1545-0047

Employer identification number 53-0116130

NATIONAL RIFLE ASSOCIATION OF AMERICA

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Parti

| (a) Name, address, and EIN (if applicable) of disregarded entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Total income | (e) End-of-year assets | (f) Direct controlling entity |
|--|---|---|-----------------------|---------------------------|-------------------------------------|
| LEXINGTON CONCORD HOLDINGS LLC - 83-1798978 11250 WAPLES MILL RD | | | | | |
| FAIRFAX, VA 22030 | DEVELOPMENT PHASE | DELAWARE | 0. | 0. NRA | RA |
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| Part II Identification of Related Tax-Exempt Organizations. Complete | rtions. Complete if the organization an | if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt | t IV, line 34, becaus | e it had one or more n | elated tax-exempt |

organizations during the tax year.

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Exempt Code section | (e) Public charity status (if section | (f) Direct controlling entity | (g) Section 512(b)(13) controlled entity? | (b)(13) |
|--|-------------------------|---|-------------------------------|---------------------------------------|-------------------------------|--|----------------|
| | | | | 501(c)(3)) | | Yes | S _O |
| NRA FOUNDATION INC - 52-1710886 | | | | | | | |
| 11250 WAPLES MILL RD | | | | | | | |
| FAIRFAX, VA 22030 | CHARITABLE | DISTRICT OF COLUMBIA 501(C)(3) | 501(C)(3) | LINE 7 | NRA | × | |
| NRA SPECIAL CONTRIBUTION FUND - 23-7367534 | | | | | | | |
| 11250 WAPLES MILL RD | | | | | | | |
| FAIRFAX, VA 22030 | CHARITABLE | NEW MEXICO | 501(C)(3) | LINE 7 | NRA | × | |
| NRA CIVIL RIGHTS DEFENSE FUND - 52-1136665 | | | | | | | ĺ |
| 11250 WAPLES MILL RD | | | | | | | |
| FAIRFAX, VA 22030 | CHARITABLE | VIRGINIA | 501(C)(3) | LINE 7 | NRA | × | |
| NRA FREEDOM ACTION FOUNDATION - 26-1277941 | | | | | | | |
| 11250 WAPLES MILL RD | | | | | | | |
| FAIRFAX, VA 22030 | CHARITABLE | VIRGINIA | 501(C)(3) | LINE 7 | NRA | × | |
| | | | | | | | |

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

53-0116130

NATIONAL RIFLE ASSOCIATION OF AMERICA

Schedule R (Form 990)

Part II Continuation of Identification of Related Tax-Exempt Organizations

| | 3 | 3 | 5 | 3 | | | |
|--|------------------|---|------|-----------------------------------|---------------------------|---|-------------------------------|
| Name, address, and EIN of related organization | Primary activity | Legal domicile (state or foreign country) | Sode | Public charity status (if section | Direct controlling entity | Section 512(b)(13) controlled organization? | 12(b)(13) billed ation? |
| | | | | 501(c)(3)) | | Yes | 8 |
| RA POLITICAL VICTORY FUND - 52-1083020 | | | | | | | |
| 1250 WAPLES MILL RD | | | | | | | |
| AIRFAX, VA 22030 | PAC/SSF | VIRGINIA | 527 | -2 | NRA | × | |
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Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. Part III

| (i) (k) General or Percentage managing ownership | 800.66 | | |
|---|--|--|--|
| General or managing partner? | × | | |
| Code V-UBI Gamount in box 20 of Schedule F-1065) | N/A | | |
| (h) Disproportionate affocations? | × | | |
| (g) Share of end-of-year assets | .0 | | |
| (f) Share of total income | .0 | | |
| (e) Predominant income (related, unrelated, excluded from tax under sections 512-514) | 0 | | |
| (d) Direct controlling entity | NRA | | |
| (c) Legal domicile (state or foreign country) | DE | | |
| (b) Primary activity | INVESTMENT | | |
| (a) Name, address, and EIN of related organization | WBB INVESTMENTS, LLC - 32-0569014, 11250 WAPLES MILL RD, FAIRFAX, VA 22030 | | |

Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year, Part IV

| (a) | (q) | (c) | (p) | (e) | | (6) | 3 | | |
|--|---------------------|--|------------------------------|---------------------------------|-----------------------|----------------------|----------------------|--|----------------------|
| Name, address, and EIN of related organization | Primary activity | Legal domicile (state or foreign | Direct controlling entity | Type of entity (C corp, S corp, | Share of total income | Share of end-of-year | Percentage ownership | Section 512(b)(13) controlled entity? | (13) ed y? |
| | | country) | | denii o | | doodlo | | Yes | ^o N |
| WINGATE CHURCH INSURANCE SERVICES INC | | | | | | | | | |
| 11250 WAPLES MILL RD | | | | | | | | | |
| FAIRFAX, VA 22030 | DEVELOPMENT PHASE | DE | NRA | C CORP | 0. | 0. | 100% | × | |
| NRA HOLDINGS COMPANY INC - 02-0558658 | | | | | | | | | |
| 11250 WAPLES MILL RD | | | | | | | | | |
| FAIRFAX, VA 22030 | MANAGEMENT SERVICES | VA | NRA | C CORP | 0 | 0 | 1008 | × | |
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Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

| Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. | | | | | Yes | 2 |
|--|----------------------------|--|--|----------|-----|------|
| 1 During the tax year, did the organization engage in any of the following transaction | ns with one or more re | transactions with one or more related organizations listed in Parts II-IV? | in Parts II-IV? | 100 | | |
| a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity | ity | | | <u>-</u> | × | |
| b Gift, grant, or capital contribution to related organization(s) | | | | 9 | | × |
| c Gift, grant, or capital contribution from related organization(s) | | | | 5 | × | |
| d Loans or loan guarantees to or for related organization(s) | | | | 5 | | × |
| e Loans or loan guarantees by related organization(s) | | | | 9 | × | |
| | | | | | | |
| f Dividends from related organization(s) | | | | # | | × |
| g Sale of assets to related organization(s) | | | | 5 | | × |
| h Purchase of assets from related organization(s) | | | | F | | × |
| i Exchange of assets with related organization(s) | | | | ÷ | | × |
| j Lease of facilities, equipment, or other assets to related organization(s) | | | | ÷ | | × |
| Is I noted of familities and investment or address enough from solutional automaticals. | | | | | | Þ |
| A Lease of lacinities, equipment, of other assets from related organization(s) | | | | ¥ | | 4 |
| I Performance of services or membership or fundraising solicitations for related org | related organization(s) | | | F | × | |
| m Performance of services or membership or fundraising solicitations by related orga | related organization(s) | | | 돈 | | × |
| n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) | tion(s) | | | 1p | × | |
| Sharing of paid employees with related organization(s) | | | | 9 | × | |
| | | | | | | |
| p Reimbursement paid to related organization(s) for expenses | | | | 0 | | × |
| q Reimbursement paid by related organization(s) for expenses | | | | 19 | × | |
| | | | | | | |
| r Other transfer of cash or property to related organization(s) | | | | + | × | |
| s Other transfer of cash or property from related organization(s) | | | | 18 | | × |
| 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. | who must complete th | is line, including covered | relationships and transaction thresholds. | | | |
| (a) Name of related organization | (b) Transaction type (a-s) | (c) Amount involved | (d) Method of determining amount involved | lved | | |
| (1) NRA FOUNDATION INC | Ą | 180,000.CASH | CASH VALUE | | | |
| (2) NRA FOUNDATION INC | υ | 13,525,570. | 570. CASH VALUE | | | |
| (3) NRA FOUNDATION INC | М | 5,000,000. | 5,000,000.CASH VALUE | | | |
| (4) NRA FOUNDATION INC | 0 | 13,083,925. | CASH VALUE | | | |
| (6) NRA FOUNDATION INC | a | 4,218,390. | 218,390. CASH VALUE | | | |
| (6) NRA CIVIL RIGHTS DEFENSE FUND | บ | 433,872. | CASH VALUE | | | |
| 832163 10-02-18 | | | Schedule R (Form 990) 2018 | (Form | 666 | 2018 |

53-0116130

NATIONAL RIFLE ASSOCIATION OF AMERICA

Schedule R (Form 990)

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

| (a) Name of other organization | (b) Transaction type (a-r) | (c) Amount involved | (d) Method of determining amount involved |
|-------------------------------------|----------------------------|------------------------|---|
| (7) NRA CIVIL RIGHTS DEFENSE FUND | Q | 39,431. | 39,431. CASH VALUE |
| (8) NRA SPECIAL CONTRIBUTION FUND | A | 120,000. | 120,000. CASH VALUE |
| (9) NRA SPECIAL CONTRIBUTION FUND | a | 1,805,930. CASH VALUE | CASH VALUE |
| (10) NRA POLITICAL VICTORY FUND | ж | 3,078. | 3,078. CASH VALUE |
| (11) LEXINGTON CONCORD HOLDINGS LLC | ø | 88,410. | 88,410.CASH VALUE |
| (12) | | | |
| (13) | | | |
| (14) | | | |
| (15) | | | |
| (16) | | | |
| (17) | | | |
| (18) | | | |
| (19) | | | |
| (20) | | | |
| (21) | | | |
| (22) | | | |
| (23) | | | |
| (24) | | | |
| | | | |

Page 4

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37. Part VI Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

| Name, address, and ENA | (K) | Percentage ownership | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0000 0000 | 990J &V 10 |
|--|----------|--|-------------------|---|---|---|----------|---|---|-----|---|---|---|---|---|---|---|---|---|---|----------|------|---|---|---|---|---|----------|-------|---|-----------|------------|
| The address, and EIN Primary activity, (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c | 5 | naging rtner? | S No | | | | | | | | | | | | | | | | | | | | | 1 | | | | | | | | 5 |
| The address, and EIN Primary activity, (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c | | 20 mai | Ϋ́ | _ | | | \dashv | | _ | | _ | | - | L | | | | | | | \dashv | _ | - | + | | | - | - | | | | <u>-</u> |
| The address, and EIN Primary activity, (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c | 0 | Code V-UBI amount in box | (Form 1065) | | | | | | | | | | | | | | | | | | | | | | | | | | | | School | 350155 |
| The address, and EIN Primary activity, (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c | Ξ | spropor- tionate ocations? | es No | | | | | | | | | | | | | | | | | | | | | 1 | | | | | | | | |
| n. address, and EIN Primary activity Legal dominile predominant income pares sections of the country) sections of the country) sections of the country sections of 22-56 ft) free from a pares sections of 22-56 ft) free from the country of the coun | \vdash | <u>≅</u> | Σ. | _ | _ | | + | | | _ | | | | _ | | | | _ | | | \dashv | _ | | + | _ | | _ | \dashv | | | 1 | |
| e, address, and EIN Primary activity Legal domicile of entity country) Country Country | (6) | Share of end-of-year | assets | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| re, address, and EIN Primary activity Legal domicile (related unrelated, country) sections 512-514) redominant income country) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| re, address, and EIN Primary activity Legal domicile (related unrelated, country) sections 512-514) redominant income country) | (e) | ners sec. 1(c)(3) irgs.? | S No | | | | | | | | | | | | | | | | | | | | | 1 | | | | | | | | |
| re, address, and EIN Primary activity Country) of entity country) | | e, se | ٤ | | _ | | + | _ | _ | + | | _ | _ | | _ | _ | | | _ | _ | \dashv | | _ | + | | _ | | + | | | 1 | |
| re, address, and EIN Primary activity Country) of entity country) | (g) | Predominant incom (related, unrelated excluded from tax un | sections 512-514) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ne, address, and EIN Primary activity of entity | | ejg jgn | | | | | 1 | | | | | | | | | | | | | | | | | 1 | | | | 7 | | | 1 | |
| 1 8 | (0) | Legal domic (state or fore | country) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | 1 | | | | |
| 1 8 | | ctivity | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1 8 | <u> </u> | narya | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1 8 | | Prin | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1 8 | | | | | _ | Т | + | 1 | | i - | | | Г | | | | T | | | | | 1 | 1 | + | Т | _ | _ | \dashv | Т | _ | 7 | |
| | l | Name, address, and EIN of entity | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Provide additional information for responses to questions on Schedule R. See instructions.

PART II

THE NRA IS A 501(C)(4) MEMBERSHIP ASSOCIATION WITH FOUR 501(C)(3)

PUBLIC CHARITIES AND A SECTION 527 POLITICAL ACTION COMMITTEE (PAC)

WHICH IS A SEPARATE SEGREGATED FUND. THE FOUR CHARITIES AFFILIATED WITH

THE NRA ARE NRA CIVIL RIGHTS DEFENSE FUND, NRA FOUNDATION INC, NRA

FREEDOM ACTION FOUNDATION, AND NRA SPECIAL CONTRIBUTION FUND DBA NRA

WHITTINGTON CENTER. THE POLITICAL ACTION COMMITTEE IS NRA POLITICAL

VICTORY FUND; NRAPVF IS A SEPARATE UNINCORPORATED PAC OF THE NRA. IN

THE EVENT THAT ANY FUNDS ARE RECEIVED BY THE NRA AND EARMARKED TO THE

PAC, THE NRA HAS SYSTEMS IN PLACE TO ENSURE ANY SUCH RECEIPTS ARE

PROMPTLY AND IMMEDIATELY DEPOSITED INTO THE SEPARATE SEGREGATED FUND'S

ACCOUNT.

PART III

WBB INVESTMENTS, LLC WAS FORMED IN CONNECTION WITH A POSSIBLE

TRANSACTION THAT WAS NEVER ULTIMATELY EXECUTED. A CERTIFICATE OF

CANCELLATION HAS BEEN FILED TO DISSOLVE THE COMPANY.

PART V

LINE 1C THIS INFORMATIONAL NOTE REGARDS QUALIFIED CHARITABLE GRANT

MAKING. ALL GRANTS MADE BY NRA FOUNDATION AND NRA CIVIL RIGHTS DEFENSE

FUND TO THE NRA ARE SUBJECT TO STRINGENT REVIEW PROCESSES REQUIRING

THAT THE GRANTS BE MADE AND USED ONLY FOR QUALIFIED CHARITABLE PURPOSE

PROGRAMS. THE NRA IS REQUIRED TO PROVIDE AN ACCOUNTING TO THE CHARITIES

AS DOCUMENTATION THAT PROCEEDS WERE USED BY THE NRA FOR QUALIFIED

CHARITABLE PURPOSES AS SET FORTH IN THE GRANT DOCUMENTS.